

## COUNTY GOVERNMENT OF MARSABIT COUNTY PUBLIC SERVICE BOARD OF MARSABIT

## **APPLICATION FOR EMPLOYMENT FORM**

Please complete this form in **BLOCK** letters as appropriate and submit to the Secretary, County Public Service Board of Marsabit, P.O.BOX 110, 60500 MARSABIT, KENYA.

| 1. Vacancy Applied For                        |              |                |           |                             |
|---|--------------|----------------|-----------|-----------------------------|
| Vacancy/Post:                                 |              | Vacancy No:    |           |                             |
| Ministry/Department:                          |              | Department:    |           |                             |
| 2. Personal Details                           |              |                |           |                             |
| Name of applicant:                            |              |                |           | Title:                      |
| Surname                                       | First Name   | Other Name(s): | : (]      | Prof/Dr/Mr/Mrs/Miss/Ms/Rev) |
| Date of Birth:                                | Gender:      | Male []        | Female    | []                          |
| (dd-mm-yyyy)                                  |              |                |           |                             |
| Marital Status: Single[]                      | Married[]    | Widowed[]      |           | Divorced[]                  |
| Children (How many? If applicable)            |              |                |           |                             |
| Nationality: ID No/Pass                       | sport No:    | Emple          | oyment/Pl | No:                         |
| Address:                                      | Postal Cod   | le:            |           |                             |
| Home County:                                  | Home Ward:   |                |           | Village:                    |
| Home District: Div                            | vision:      | Sub C          | County/Co | nstituency:                 |
| Telephone:Mobile:                             |              | E-mail address | s:        |                             |
| Alternative contact person:                   | Tele         | phone:         |           |                             |
|   |              |                |           |                             |
| 3. Applicants in the Public Service Only      |              |                |           |                             |
| Ministry/Department/Other Public Institutions | s:           |                | Station:  | Present                     |
| Substantive Post:                             |              |                |           |                             |
|   |              |                |           | (dd-mm-yyyy)                |
| Upgrading (if applicable) post:               |              | effective dat  | te:       |                             |
|   |              |                |           | (dd-mm-yyyy)                |
| Terms of Service: Permanent [ ] Contract      | t[] Tempor   | ary [] Provide | ent[]     | Supernumerary [ ]           |
|   |              |                |           |                             |
| 4. Applicants in Private/NGO/Other Sect       | cors         |                |           |                             |
| Current employer:Po                           | sition held: |                | effective | e date:                     |
|   |              |                |           | (dd-mm-yyyy)                |
| Salary (monthly) Kshs                         |              |                |           |                             |

| 5. Other Deta    | ils           |                           |                          |              |                        |                 |
|------------------|---------------|---------------------------|--------------------------|--------------|------------------------|-----------------|
| Ethnicity:       |               | Indicate the la           | anguage(s) you are prof  | ficient in   |                        |                 |
| Do you suffer    | from any ph   | ysical impairment?        | Yes []                   | No [ ]       |                        |                 |
| If yes give deta | ails:         |                           |                          |              |                        |                 |
| Have you ever    | been convi    | cted of any criminal off  | ences or a subject of pr | obation ord  | er? Yes[] No[]         |                 |
| Have you ever    | been dismis   | ssed or otherwise remov   | ved from employment?     | Yes          | s[] No[]               |                 |
| If Yes, State re | eason (s) for | dismissal/removal         |                          | ef           | fective date           |                 |
|                  |               |                           |                          |              | (dd-mn                 | n-yyyy)         |
| Have you ever    | been interv   | iewed by County Public    | c Service Board of Mar   | sabit before | ?? Yes [ ] No [ ]      | ]               |
| If Yes, State th | ne Post:      |                           | Intervie                 | ew date:     |                        |                 |
| (Declaring the   | above info    | rmation will not necess   | sarily debar an applica  | nt from em   | ployment in County     | Public Service. |
| Each case will   | l be consider | red on its own merit)     |                          |              |                        |                 |
| C A 1 '/T        |               | 1/T 1 · 1 · 1 · 1 · 6 · 4 |                          | TT' I A      |                        |                 |
| 6. Academic/I    | Professional  | /Technical Qualificati    | ions (Starting with the  | e Highest)   |                        |                 |
| •                |               | University/College/       | Award/Attainment         | Courses      | Subject<br>(Econ,Maths |                 |
| Year             | r             | Institution/School        | (e.g Degree,<br>Diploma, | (e.g PhD     | , at a)                | Class/Grade     |
|                  |               |                           | Certificate)             | Msc, BA      | .)                     |                 |
| From             | To            |                           |                          |              |                        |                 |
|                  |               |                           |                          |              |                        |                 |
|                  |               |                           |                          |              |                        |                 |
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|                  |               |                           |                          |              |                        |                 |
| <u>L</u>         |               |                           |                          |              |                        | 1               |
| 7. Other Rele    | vant Cours    | es and Training/Regis     | tration/Membership t     | o Professio  | nal Bodies/Institution | on              |
| <b>V</b>         | Т.            | antitudian/Callaga        | C                        |              | Data                   | 1.              |
| Year             | II.           | nstitution/College        | Courses                  |              | Detai                  | IIS             |
|                  |               |                           |                          |              |                        |                 |
|                  |               |                           |                          |              |                        |                 |
|                  |               |                           |                          |              |                        |                 |
|                  |               |                           |                          |              |                        |                 |
|                  |               |                           |                          |              |                        |                 |

| Year | Institution/College | Courses | Details |
|------|---------------------|---------|---------|
|      |                     |         |         |
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## 8. Employment Details (Starting with the most recent)

| Year |    | Employer's Name  | Position/Rank/Designation | Job Group/Gross        |
|------|----|------------------|---------------------------|------------------------|
|      |    | 2projet s i tune | 1 05.11011/2 tongillition | Monthly Salary (Kshs.) |
| From | To |                  |                           |                        |
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| D. Briefly state your current duties, responsibilities and assignments   |
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| 10. Please give details of your abilities, skills and experience which you consider are relevant to the position applied for.  The information may include an outline of your most recent achievements and your reasons for applying |
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## **Personal References**

The names of distinguished persons should not be used unless they really know you well; the names of relatives or of those from whom you send testimonials should not be used. <u>The names of members or staff of the County Public Service Board of Marsabit should also not be used.</u>

| 1. Full Name:                                 |   |
|---|---|
| Address:                                      |   |
| Telephone No:                                 | E-mail address:   |
| Occupation:                                   |   |
| Period for which he/she has known you:        |   |
| 2. Full Name:                                 |   |
| Address:                                      |   |
| Telephone No:                                 | E-mail address:   |
| Occupation:                                   |   |
| Period for which he/she has known you:        |   |
| Declaration:                                  |   |
| I hereby certify to the best of my knowledge  | that the particulars given on this form are correct and I understand that any |
| incorrect information may lead to disqualific | cation/legal action.  |
| Date:   |   |
| (dd-mm-yyyy)                                  | Signature of the Applicant  |