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APPLICATION FOR APPOINTMENT TO THE OFFICE OF THE AUDITOR GENERAL

Note:

- *Please study the form carefully before completing and provide full and accurate information.*
- *Giving false and inaccurate information will lead to disqualification*

PART A: JOB PARTICULARS

Post	
Scale	
Job Reference	

PART B: PERSONAL DETAILS

Surname		
First Name		
Other names		
Date of Birth:	Age:	Sex:
dd/mm/yyyy		
Postal Address:		
E-mail Address:		
Telephone Number:		
Nationality:		
District of origin		
Village		
Marital Status (<i>Tick as appropriate</i>)		
Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/>		
Number and age of Children		

PART C: 4 RELEVANT TRAINING CERTIFICATES

Institution	Award	Duration

PART D: EMPLOYMENT RECORD

Current Organization (<i>where applicable</i>)	Position held/Designation
Present Post:	Salary:
	dd/mm/yyyy
<i>Terms of employment (Tick as appropriate)</i>	
<i>Contract</i>	<i>Permanent</i> <i>Probation</i> <i>Casual</i> <i>Temporary</i>

Have you ever been convicted of a criminal offence? (If so give brief details including sentence imposed)

N.B: Conviction for a criminal offence will not necessarily prevent an applicant from being employed in the Office of the Auditor General but giving of false information in that context is an offence.

PART E: REFERENCES (Professional and Character)

1) PROFESSIONAL REFEREE	
FULL NAME	CONTACT (<i>Telephone & Email</i>)

2) CHARACTER REFEREE		
FULL NAME	CONTACT (<i>Telephone & Email</i>)	RELATIONSHIP WITH APPLICANT

PART F: APPLICANT'S DECLARATION:

I declare that the information given on this form is true and complete and I hereby authorize the employer to validate it.

Signature:.....

Name (*in Block letters*): Date: /..... /.....

FOR OFFICIAL USE ONLY:

Name & Signature:..... Date: