

**ECONOMY AND FISHERIES (AGRO-INDUSTRY AND FOOD SECURITY
DIVISION)**

Application Form for the post of Gardener/Nursery Attendant – Agricultural Services

PART A (To be filled in by the Applicant)

1. Title: Mr Mrs Miss Ms
(Please tick as appropriate)
2. Marital Status: Married Single Other:
(Please tick as appropriate)
3. Surname:
(In block letters)
- Other Names: Male/Female:
4. Date of Birth: Age:
5. National Identity No:
6. Full Residential Address:
(In block letters)
7. Phone No: Office Home Mobile.....
8. Date joined service: as
9. Date of First Appointment/Employment:
10. Date of Transfer to PPE:
11. Present Post held (State whether temporary/substantive):
12. Date of Present Appointment/Employment:
13. Present Place of Posting:
14. Date/s of Previous Appointment and Grade:

FOR OFFICIAL USE	
Age	
Qualifications	
Experience	
Remarks	
Eligible	Not Eligible

Post held	Temporary/Substantive	Ministry/Department	Date of Appointment

15. Present Salary:

16. Educational Qualifications (**Attach documentary evidence**):

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17. Experience relevant to the post applied for (**Attach documentary evidence of experience claimed**)

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Date: Signature of Applicant:

PART B (To be filled in by Officer-in-Charge)

(a) Is the employee presently performing the duties of a higher post? Yes/No
If yes, please give details e.g. Title of higher post, date as from which the duties are being performed, allowance drawn etc.

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(b) Does the applicant reckon experience of the duties of the post applied for? Yes/No
If yes, please give details with dates e.g. Period of actingship/assignment of duties, replacement as relief in the post.

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(b) Has the applicant been subject to any disciplinary action during the last ten (10) years or subject to any prosecution before a court of law for any offence? Yes/No

If yes, please give details including punishment inflicted

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(c) Report on applicant:

(i) Conduct:

(ii) Work:

(iii) Attendance:

(d) Statement of sick leave and unauthorised absences without pay taken by applicant.

Record of Sick Leave:

Record of unauthorised absence:

2022:

2022:

2023:

2023:

2024:

2024:

2025 to date:

2025 to date:

PART C (Human Resource Division)

I certify that the particulars given in Part A and B have been verified and found correct, except:

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Signature:
Name:
Post Held:
Date: