APPLICATION FORM FOR THE POST OF LABORATORY AUXILIARY AT THE MINISTRY OF AGRO-INDUSTRY AND FOOD SECURITY

PART A (To be filled in by the Applicant)

1.	Title: Mr □ (Ple	Mrs □ Miss ase tick as appropriate)	□ Ms □	
2.	Marital Status: (Ple	Married □ Sing ase tick as appropriate)	e 🗌 Other:	
3.	Surname: (In block letters)			
4.	Other Names:			
5.	Date of Birth:			
6.	National Identity Card No:			
7.	Full Residential Address:			
8.	Phone No: Office Home Mobile			
9.	Present Post Held:			
10.	Date of Present Appointment:			
11.	Posting: (i) Pres	ent Ministry/Department		
	(ii) Plac	e of work:		
12.	Date joined service:			
13.	Date of 1 st Appointment:			
14.	Date transferred to Permanent and Pensionable Establishment:			
15.	Present salary per month (Basic): Rs			
16.	Previous Employment in the Government Service			
	Post held	Temporary/Substantive	Ministry/Department	Date of Appointment

Post held	Temporary/Substantive	Ministry/Department	Date of Appointment

17	Examinations passed (please attach photocopies of certificates)				
	(i) Primary:				
	(ii) Other:				
18.	Experience relevant to the post applied for (attach documentary evidence of experience claimed)				
19.	Have you been the subject of an investigation/enquiry for any offence during the last 10 years?				
	Yes D No D (Please tick as appropriate)				
	If Yes, indicate nature of offence and date of outcome:				
20.	Have you ever been prosecuted before a court of law for any offence AND subsequently found guilty during the last 10 years?				
	Yes \Box No \Box				
(Pleas	e tick as appropriate)				
	If Yes, give details (court, charge, date of judgement and sentence – eg. imprisonment, fine, caution or conditional discharge):				
21.	Have you ever resigned or retired or been dismissed from the Public Service on any grounds whatsoever				
	$Y_{es} \square N_0 \square$				
	(<i>Please tick as appropriate</i>) If Yes, give details:				
	- 				
	DECLARATION				
I,	, the undersigned				
applica materi	ant , declare that the particulars in this application are true and accurate and that I have not suppressed an al fact.				
Date:	Signature of Applicant:				

PART B (To be filled by Head of Division/Section/Unit of Ministry/Department concerned)

(i)	Report on applicant:				
	Work:				
(ii)	Comments, if any, on experience claimed and other remarks:				
		Signature:			
Date:		Name:			
		Post Held:			
<u>PAR'I</u>	<u>C (to be filled Human Resource</u>	e Section of Ministry/Department where applicant is posted)			
(i)	i) Has applicant been subject to any disciplinary action during the last 10 years or subject to any prosecution before a court of law for any offence? Yes/No				
If yes, please give details					
(ii	(ii) Statement of sick leave and unauthorized absences without pay taken by applicant.				
	Record of Sick Leave:	Record of unauthorized absence			
	2019:				
	2020:				
	2021:				
	2022 (to date)				
(ii	given in Part A, B, and C have been verified and found correct, except:				
	Stamp of	Signatura			
	Stamp of Ministry/Department	Signature: Name:			
		Post Held:			
		Date:			