**APPLICATION FORM FOR THE POST OF TRADESMAN’S ASSISTANT AT THE MINISTRY OF AGRO-INDUSTRY AND FOOD SECURITY**

**PART A (To be filled in by the Applicant)**

1. Title: Mr Mrs Miss Ms

*(Please tick as appropriate*)

1. Marital Status: Married Single Other: …………………………………………

*(Please tick as appropriate*)

1. Surname: ……………………………………………………………………………………………  
    (*In block letters*)
2. Other Names: ……………………………………………………………………………………………

(*In block letters*)

1. Date of Birth: …………………………………..………………………………………………………..
2. National Identity Card No: …………………………..………………………………………………
3. Full Residential Address: ………………………………………….………………………………………

(*In block letters*)

………………………………………………………………………………….

1. Phone No: Office ……………….…… Home ………………………. Mobile………..……….................
2. Present Post Held: …………………………………………………………...…………………………….

(whether temporary/substantive)

1. Date of Present Appointment: ……………………………………………………..………………………
2. Posting: (i) Present Ministry/Department: ….………………………………………..……………….

(ii) Place of work: …………………………………………………………………..………..

1. Date joined service: …………………………………………………………………………………….…
2. Date of 1st Appointment: ………………………………………………………………………………….
3. Date transferred to Permanent and Pensionable Establishment: ………………………………………….
4. Present salary per month (Basic): Rs ……………………………………………………………………...
5. Previous Employment in the Government Service

|  |  |  |  |
| --- | --- | --- | --- |
| 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 No

(*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 No

(*Please 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?

Yes No

(*Please tick as appropriate*)

If Yes, give details:

………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………

**DECLARATION**

I, …………………………………………………………………….………………………...…., the undersigned applicant , declare that the particulars in this application are true and accurate and that I have not suppressed any material fact.

Date: ………………………………….….…….. Signature of Applicant: ………..……………..……………….

**PART B (To be filled by Head of Division/Section/Unit)**

1. Report on applicant:

Conduct: …………………………………………………………………………………………..

Work: ………………………………………………………………………...………………….

Attendance: ……………………………………………………………………………...………..

1. Comments, if any, on experience claimed and other remarks:

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Signature: ………………….………………….

Date:............................................ Name: …………………..............……………..

Post Held: ……………………………………..

**PART C (to be filled by Head of Division/Section/Unit where applicant is posted.)**

1. 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

……………………………………………………………………………………………………………………………………………………………………………………………………………………

1. Statement of sick leave and unauthorized absences without pay taken by applicant.

Record of Sick Leave: Record of unauthorized absence

2018:………………………………………. 2018:………………………………….

2019:………………………………………. 2019:………………………………….

2020:………………………………………. 2020:………………………………….

2021:………..……………………………. 2021:……….…………………………

2022 to date………………………………. 2022 to date………………………….

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

……………………………………………………………………………………………………………………………………………………………………………………………………………………

Stamp of Ministry/Department

Signature: …………………………………….……….

Name: ………………………….............……………...

Post Held: ……………………………………………..

Date: …………………………………………………..

Mr./Forms/Tradesman’s\_Assistant-ApplicationformTA