



# FIJI PUBLIC SERVICE APPLICATION FORM

This form is to be used for all applications for appointment to or within the Fiji Public Service and all questions must be answered.

All entries on this form must be in the applicant's handwriting.

Applications for more than one post must be made on separate forms.

Send your completed application form to the address given in the advertisement.

POST APPLIED FOR \_\_\_\_\_

MINISTRY \_\_\_\_\_ VACANCY NO. \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

## PERSONAL DETAILS

FULL NAME: SURNAME/FAMILY NAME FIRST

*Mr/Mrs/Miss* \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

MARRIED/SINGLE \_\_\_\_\_ NO. OF CHILDREN AND AGES \_\_\_\_\_

NATIONALITY \_\_\_\_\_ EDP/TPF NO. \_\_\_\_\_ FNPf NO. \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ TEL NO. \_\_\_\_\_

CORRESPONDENCE ADDRESS (if different from above) \_\_\_\_\_

NEXT OF KIN NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

TEL. NO. \_\_\_\_\_

## QUALIFICATIONS

List details and attach copies.

(Originals to be produced when required.)

### PROFESSIONALS QUALIFICATIONS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### SERVICE EXAMINATIONS

Name of Exam. \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## REFERENCES

Give names and addresses of two persons other than relatives who will give a reference.

NAME \_\_\_\_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

## POLICE RECORD Provide details of any conviction.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## PRIVATE INVESTMENTS OF YOURSELF AND SPOUSE

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARE YOU AN UNDISCHARGED BANKRUPT?

YES	NO
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**DETAILS OF EDUCATION** List in date order.

PRIMARY & SECONDARY SCHOOLS	FROM	TO	SUBJECTS STUDIED AND EXAM. RESULTS

**TERTIARY INSTITUTIONS**


**DETAILS OF EMPLOYMENT**

List all employment for the last five years. Most recent first and any period of unemployment.

EMPLOYER	FROM	TO	JOB TITLE	SALARY	REASON FOR LEAVING

**DETAILS OF HOBBIES OR SPECIAL INTERESTS**

**SPECIAL DETAILS RELEVANT TO THIS APPLICATION**


IF APPOINTED, DATE YOU COULD START DUTY \_\_\_\_\_

TO THE BEST OF MY KNOWLEDGE AND BELIEF THE ABOVE INFORMATION IS CORRECT.

NON-PUBLIC SERVANTS

PUBLIC SERVANTS ONLY

SIGNED \_\_\_\_\_

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE OF PERMANENT SECRETARY/HEAD OF DEPARTMENT

\_\_\_\_\_

DATE \_\_\_\_\_