



e) Office Address \_\_\_\_\_

Office Phone Number \_\_\_\_\_

17. Annual house rent: \_\_\_\_\_

18. Your Immediate Neighbour's Name \_\_\_\_\_

b) Neighbour's Occupation \_\_\_\_\_

c) Office Address \_\_\_\_\_

d) Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

19. If married, name of Spouse: \_\_\_\_\_

20. Spouse's employment address: \_\_\_\_\_

21. Spouse's occupation: \_\_\_\_\_

22. Spouse's Phone Numbers \_\_\_\_\_

23. Name of spouse's employer: \_\_\_\_\_

24. No of children: \_\_\_\_\_

Details:

S/N	Name (in full)	Date of birth	Address of school attended	Amt spent to maintain child annually	Sex
a.					
b.					
c.					
d.					
e.					
f.					

25. No of people (not children) that you maintain: \_\_\_\_\_

23. Dependants: \_\_\_\_\_

Details:

S/N	Name (in full)	Relationship to you or your spouse	Age of relative	Amt spent to maintain
a.				
b.				
c.				
d.				
e.				

24a. Next of kin: \_\_\_\_\_

24b. Address of next of kin: \_\_\_\_\_

24c. Relationship to next of kin: \_\_\_\_\_

25. Schools/Institutions attended with dates (also indicate qualifications obtained) \_\_\_\_\_

26. Work experience (Give details of present and previous employment, most recent first)

Name and Address of Employer	Job	From	To Leaving	Reason for
------------------------------	-----	------	---------------	------------

**FITNESS:**

a. Details of illness, chronic ailment or disability in past five (5) years: \_\_\_\_\_

b. Serious illness, injury or operation prior to last five years: \_\_\_\_\_

c. Is your hearing or vision impaired YES or NO (if yes give details): \_\_\_\_\_

**28. WORKING RECORD**

**Note:** Disclosure of conviction does not mean you will automatically be barred from employment, but failure to disclose would however mean subsequent dismissal.

a. Have you been entrusted with sensitive duties? \_\_\_\_\_

b) Have you been convicted of any offence involving dishonesty? If so give offence, date and penalty: \_\_\_\_\_

c. Has any Package, Equipment or Property in your charge ever been stolen? If so give details \_\_\_\_\_

29. Hobbies: \_\_\_\_\_

30. Any other relevant information:

---

---

**Guarantors:**

	<b>Name</b>	<b>Address</b>	<b>Telephone No.</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I apply for employment and vouch that the preceding details are correct.

I understand that discovery of misrepresentation; fake credentials or unsatisfactory references shall lead to my immediate dismissal.

**Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_