

Application Form for Part-time Trainer/Resource Person

1.0	PERSONAL PROFILE							
1.1								
1.2								
		(in block letter						
1.3	Other Names: (in block letters)							
1.4	Maiden Name (if applicable):							
1.5	Marital Status: Married	Single	Other					
1.6	Residential Address:	(in block letter:	s)					
1.7	Date of Birth:				•••••			
1.8	National Identity No.: (Attached copy of ID)							
1.9	Nationality:							
1.10	Phone No.:							
	Home:							
	Mobile.:							
	E-mail address:							
2.0	OUALIFICATIONS SECONDARY ORDINARY LEVEL State whether Cambridge S.C or Cambridge G.C.E or London General Certificate of Education (Ordinary Level)							
	Month/Year Exam. Centre No. In	i	Month/Year Exam					
	Subject	Grade	Subject	et	Grade			
	Result Aggregate	. Aggregate						

•			bject al, Subsidiary, Ad	Level	Grac		
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•	ademic Tech	Result					
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	idenne, reen	nical, Profession	onal)				
marksheet	ts/result slips	and equivalen	ce of certificate	es (if avail	lable)		
Ceruncate							
Subject Grade		Marks	Percentage				
		TOTAL	<u> </u>				
		Grade	Grade Marks	Grade Marks Percentage	Grade Marks Percentage		

2.1

SECONDARY ADVANCED LEVEL

2.4	DIPLOMA QUALIFICATIONS (Below Degree Level) (Attach photocopies of marksheets)							
	Name of University/Examining Body							
	Duration of course/study: From To Part Time Full Time Distance Education							
	Specify (i) exact qualifications obtained							
(ii) Date of result:								
	Subjects (State whether main/subsidiary/major etc where applicable)							
2.5	DEGREE/PROFESSIONAL QUALIFICATIONS (Attach photocopies of marksheets)							
	Name of University/Examining Body							
	Duration of course/study: From To Part Time Full Time Distance Education							
	Specify (i) exact qualifications obtained.							
	(ii) Date of result:							
	Subjects (State whether main/subsidiary/major etc where applicable)							
2.6	POST DEGREE QUALIFICATIONS (Attach photocopies of marksheets)							
	Name of University/Examining Body							
	Duration of course/study: From To Part Time Full Time Distance Education							
	Specify (i) exact qualifications obtained							
	(ii) Date of result:							
	Subjects (State whether main/subsidiary/major etc where applicable)							

(Other Qualifications as laid down in the advertisement (e.g. Driving License (Specify type), First Aid, IT etc. Specify date)					
ŀ	Experience and skills relevant to the post applied for (Attach documentary evidence)					
I	EMPLOYMENT HISTORY					
(i) Present Employment in the Government Service						
	Post held Temporary/Substantive Min./Dept.					
	Date of Present Appointment Date of Confirmation in the Service Present Salary per month (Rs)					
	(Date Month Year) (Date Month Year) e.g. 01 01 02 e.g. 01 01 02					
F	Previous Employment in the Government Service					
	Post held Temporary/Substantive Min./Dept. Date of Appointment					
Ι	f on leave without pay whilst in government service during the last five years state:					
F	Period on leave: From To					
(Give details if applicable: (Organisation, Post held etc).					

6.0 EMPLOYMENT OTHER THAN IN THE GOVERNMENT SERVICE

	Post/s	Da	<u>te</u>	Name and address of employer			
		<u>From</u>	<u>To</u>				
7.0				for any offence during the last 10 years ture of offence and date of outcome.			
	(b) Have you ever been prosecuted before a court of law for any offence AND subsequently found guilty during the last 10 years?						
	Answer Yes or No	•		s (court, charge, date of judgment			
	and sentence - e.g. imprise	mmem, me, e	aution of co	martional discharge)			
	••••••	•••••	••••••				
8.0	Have you ever resigned or retire whatsoever?	ed or been disn	issed from t	the Public Service on any grounds			
	Answer Yes or No	. If yes, give	details: -				
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9.0 I certify that:

- (i) *I am/am not working on a full-time basis.
- (ii) Photocopies of Birth/Marriage Certificates, Academic and Professional Oualifications are enclosed.

*Delete as appropriate

10. IMPORTANT - PLEASE READ THE ADVERTISEMENT CAREFULLY:

Incomplete, inadequate or inaccurate filling of the form may cause the applicant's elimination from consideration. It is an offence to give false information or to conceal any relevant information. This may lead to an application being rejected or, if a candidate has already been appointed, to the termination of his appointment.

DECLARATION

Please return your completed application form to:						
Date		Signature			•••••	
willfully suppressed any material fact.						
particulars given in the application are to the best of my	kno	wledge true ar	nd accurate	and that	I have	not
I,,	the	undersigned	applicant,	declare	that	the

The Director,
National Co-operative College (NCC),
Bois Marchand Road,
Terre Rouge, 21416.

Instructions:

- i. Incomplete, inadequate or inaccurate filling of this Form may lead to rejection of your application.
- ii. Attach copies of your birth/marriage certificate, educational/professional certificates and documentary evidence of knowledge/experience claimed. **Originals to be produced when required.**
- iii. Where space provided is not adequate, please use a blank sheet and attach it herewith.
- iv. The post applied for should be clearly marked on the top left-hand corner of the envelope.
- v. Applications not made on the prescribed form **will not** be accepted.