

MINISTRY OF YOUTH AND SPORTS

APPLICATION FOR THE POST OF CARETAKER (ON ROSTER)

PART A (To be filled in by the Applicant)

1. Title: Mr Mrs Miss Ms
(Please tick as appropriate)
2. Marital Status: Married Single Other.....
(Please tick as appropriate)
3. Surname:
(In block letters)
4. Other Names:
(In block letters)
Maiden Name (if applicable):
5. Date of Birth:
6. National Identity Card No:
7. Residential Address:
(In block letters)
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8. Phone No: Office..... Home Mobile.....
9. Present post held:
(whether temporary/substantive)
10. Date of Present Appointment:
11. Posting.....
12. Date joined service :
13. Date of 1st Appointment:
14. Date transferred to Permanent and Pensionable Establishment:
15. Previous appointment held in the Government Service.

Appointment	From	To	Ministry/Department

16. Academic Qualifications (Please attach copy of Educational Qualifications)

(i) Primary :

(ii) Secondary :

(iii) Other :

17. Present Salary per month : Rs

18. Experience relevant to the post applied for (attach documentary evidence of experience claimed)

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19(a) Have you been the subject of a disciplinary action during the last 5 years?

Yes No
(Please tick as appropriate)

If Yes, indicate nature of offence and date of outcome.

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19(b) 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) :-

DECLARATION

I,, the undersigned applicant, declare that the particulars in this application are true and accurate.

Date : Signature of Applicant :

PART B (To be filled in by the Officer in Charge of the Youth Centre/Sports Complex/Maintenance Supervisor concerned)

(i) Report on applicant:

Conduct:.....

Work:

Attendance.....

Reliability

.....

Trustworthiness

.....

(ii) Comments, if any, on experience claimed and any other remarks.

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PART C (To be filled in by Human Resource Section)

(iii) Record of Sick Leave

Record of unauthorised absence

2015:.....

2015.....

2016.....

2016.....

2017(to date):.....

2017(to date):.....

Date:.....

Signature of Officer in Charge

Name (in full):.....

Post Held:.....

Date:.....