REPUBLIC OF KENYA



PUBLIC SERVICE COMMISSION OF KENYA

APPLICATION FOR EMPLOYMENT FORM

Please complete this form in **BLOCK** letters as appropriate and submit to the Secretary, Public Service Commission of Kenya, P.O.BOX 30095, 00100 NAIROBI, KENYA, or apply **On-line** via the Commission's Website <u>www.publicservice.go.ke</u>

1. Vacancy Applie	d For					
``			Va	acancy No:		
Ministry/Local Autho	ority:		D	epartment:		
2. Personal Detai	ls					
Name of applicant: .	(Surname)	First Name		Other Name(s):	Title:	
Date of Birth:	(dd-mm-yyyy)		ender: Male	Female		
Nationality:	ID	No/Passport No:	Emp	ployment/PNo:		
Address:		Postal Code:				
Home District:		Divis	ion:	Constituency:		
Telephone:		Mobile:	E-m	ail address:		
Alternative contact person:						
3. Applicants in the Public Service only						
Ministry/Department/Local Authority/Other Public Institutions:						
Present Substantive F	Post:		Job group:	effe	ctive date:	
Upgrading (if applica	ble) post:			effective date:	(dd-mm-yyyy)	
Terms of Service:	Permanent	& Pensionable	Contract	Temporary	(dd-mm-yyyy)	
4. Applicants in 1	Private/NGO/ Othe	r Sectors				
Current employer:						
Salary (monthly) Ksh						
5. Other Details						
Indicate the language(s) you are proficient in						
Do you suffer from any physical impairment? Yes No						
If yes give details:						
Have you ever been convicted of any criminal offences or a subject of probation order? Yes No						
Our Tel: +254-020-2227471-5, 2788000, Fax: +254-20-2214791, e-mail: psck@publicservice.go.ke						

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Have you ever been dismissed or otherwise removed from employment? Yes No							
If Yes, Stat	If Yes, State reason (s) for dismissal/removal						
Have you e	Have you ever been interviewed by Public Service Commission of Kenya before? Yes No						
If Yes, Stat	e the Post:			Interview date:			
(Declaring the above information will not necessarily debar an applicant from employment in Public Service. Each case will be considered on its own merit) 6 Academic /Professional/Technical Qualifications (Starting with the Highest)							
	/ear	University/College/ Institution/School	Award/Attainment (e.g Degree, Diploma, Certificate)	Courses (e.g PhD, Msc, BA)	Subject (Econ,Maths e.t.c)	Class/Grade	
From	То						

7. Other Relevant Courses and Training /Registration/Membership to Professional Bodies/Institution

Year	Institution/College	Courses	Details

8. Employme	n Details (<i>startin</i>	g with the most recent)	Position/	Job Croup/Cross Monthly Saler		
Y	ear	Employer's Name	Position/ Rank/Designation/	Job Group/Gross Monthly Salary (Ksh.)		
From	То					
9. Briefly state y	our current duties,	responsibilities and assignments				
10. Please give details of your abilities, skills and experience which you consider are relevant to the position applied for. The information may include an outline of your most recent achievements and your reasons for applying						
11. Personal I						
The names of distinguished persons should not be used unless they really know you well; the names of relatives or of those from whom you send testimonials should not be used. <u>The names of members or staff of the Public Service Commission of Kenya should also not be used.</u>						
1. Full Name:						
Address:						
Telephone No:.		E-mail a	ddress:			
Occupation:						
Period for which he/she has known you:						
2. Full Name:						
Address:						
Telephone No:.		E-mail address:				
Occupation:						
Period for which	Period for which /he/she has known you:					
12. Head of Department/Supervisor Recommendation (PSC 2A) Form Please complete Head of Department Recommendation (PSC 2A) Form (Part I) and submit to your Head of Department / Supervisor (if applicable).						
Declaration:						
I hereby certify to the best of my knowledge that the particulars given on this form are correct and I understand that any incorrect information may lead to disqualification/legal action.						
	mm-yyyy)		of the Applicant			
Our Tel: +254-020-2227471-5, 2788000, Fax: +254-20-2214791, e-mail: psck@publicservice.go.ke						
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