Social Protection Project
Welfare Benefits Board
Ministry of Finance, Planning and Economic Development
Procurement Officer/Project Officer (Finance/Accounting)
Application Form

POST APPLIED FOR:

1.	Name in Full :													
2.	Name with Initials:													
3.	Permanent Address:													
4	Tel :													Fax :
	Mobile													E-mail :
5	National Identify Card No :													
6	Date of Birth :													
	Year :													Month : Day :
7	Age as at closing date of Applications:													
	Years :													Months : Days :
8	Civil Status :													
9	Citizenship :													
10	Higher Educational Qualifications [First Degree and Postgraduate Degree (s)]													

University/ Institution	Degree	Class	Special or General Degree	Main Subject/Subjects	From-To	Effective date of Degree

11	Professional Qualifications/Charted Corporate Membership etc.			
	University/Institution	Examination passed	Specialization	Year of Passing
12	Certificates (if any)			
	Course/Certificate	Field	Name of the Institution/University	Year
13	Any other Academic Distinctions Scholarships, Medals, Prizes, etc. (indicate the Institution from which such awards have been obtained) and research and publications, if any			

14 Current Position

Designation	Institution	Brief Description of Duties	Time Period	
			From (dd/mm/yyyy)	To (dd/mm/yyyy)

15 Previous Experience (Starting with present position and continue in reverse order)

Post/ Designation	Institution	Brief Description of Duties	Relevancy to the applied position	Time Period	
				From (dd/mm/yyyy)	To (dd/mm/yyyy)

16 Proficiency in Languages (Please Mark' √'in the relevant cage)

Language	Written				Spoken			
	Very Good	Good	Satisfactory	Week	Very Good	Good	Satisfactory	Week

17	Extra-Curricular activities :
18	Are you under any obligatory National Service (If yes, specify) :
19	If selected, what is the earliest date that you can assume duties :
20	Names of two nonrelative referees (with addresses and contact numbers) to whom reference can be made:
21	I hereby declare that the particulars furnished by me in the application are true and accurate. I am also aware that if any particulars furnished by me in this application are found to be false or incorrect before appointment, I am disqualified. If inaccuracy is discovered after selection, I will be dismissed the assignment without any compensation and liable to pay the remuneration gained to the Social Protection Project, Welfare Benefits Board. I am physically and mentally fit to work any part of the country and I assure that I have not been found convicted by a court or not found guilty by any internal disciplinary proceedings of any organization. Date: …….. Signature:……
22	(This part is applicable only for candidates who engage in government employment) Attestation of the head of the Department/Institution: Ihereby certify that Mr./Mrs./Miss……who is working in this institution, is working in the post of ……..and his/her work and conduct are satisfactory, no disciplinary action pending against him/her and no decision has been taken to impose any such in the future. If he/she will be selected for this post, he/she can/cannot be released from the service. Date …….. …….. Signature of the Head of the Department or Authorized Officer Name : ……. Designation : ……... Institute : …….

23	Note :
	If the sheets above are not sufficient, please use extra sheets, when & where necessary. Indicate the list of documents attached along with the application form. (a) ……. (b) ……. (c) …….