

Please answer each question clearly and completely. TYPE OR PRINT LEGIBLY. Read carefully and follow all directions. Use (□) for any dialog boxes.

1. POST APPLIED FOR:

2. DATE OF ADVERTISEMENT:

3. PERSONAL HISTORY

Family Name:
FirstNames:
Maiden Name (if applicable):
Date of birth:
Place of birth:
Nationality at birth:
Present Nationality:
Gender: MALE
Permanent address:
Present address:
Office phone number:
Office fax number:
Residence phone number:
E-mail address:

4. Do you have any dependent children?

Yes 🛛 No

If your answer is "yes", give the following information: (Note: You are allowed to input data up for a maximum of **4** dependent children)

Name of children	Date of birth (day/month/year)	Place of birth	Nationality	Gender

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	1 of 7



5. QUALIFICATIONS:

EDUCATION, Give full details-N.B Please give exact titles of degrees in original language. Please do not translate or equate to other degrees.

A. UNIVERSITY OR EQUIVALENT				
Name, Place and	Attended from/to	Post Degrees, Degrees and	Main course of study	
Country	Month/Year	academic;		
		Distinctions Obtained		

B. SCHOOLS OR OTHER FORMAL TRAINING				
Name, Place and Country	Attended from/to Month/Year	Certificates Obtained		

6. List any significant publications or papers you have written and which might be of relevance to the post being applied for.

7. EMPLOYMENTRECORD

Please fill in details of your employment record below in chronological order, starting with your current or latest position first. Use a separate block for each post.

A. Present Post (Last Post, if not presently in employment)

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	2 of 7



Exact Title Of Post	Name Of Employer	From Month/Year	To Month/Year
Address Of Emp	loyer :		
Type Of Organis	ation		
-	To Whom You Report :		
No. And Categor	ies Of Employees Supervi	ised By You :	
Any Job Problem	15:		
How You Are Ha	ndling Them:		

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	3 of 7



B. Previous Post

Exact Title Of Post	Name Of Employer	From Month/Year	To Month/Year
	ry		
Address Of Employer :			
Type Of Organisation :		Name Of Supervisor :	
No And Kind Of Employees Sup	pervised By You :		
Salary Obtained :			
Reason Of Leaving:			
Description Of Duties :			

C. Previous Post

Exact Title Of Post	Name Of Employer	From	То
		Month/Year	Month/Year
Address Of Employer :			
Type Of Organisation:		Name Of Supervisor	
No And Kind Of Employees	Supervised By You :		
Reason Of Leaving:			
Description Of Duties :			

D. Previous Post

Exact Title Of Post	Name Of Employer	From Month/Year	To Month/Year
Address Of Employer :			
Type of Organisation:	Name	Of Supervisor	

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	4 of 7



No And Kind Of Employees Supervised By You :
Reason Of Leaving:
0
Description Of Duties :

E. Previous Post

Exact Title Of Post	Name Of Employer	From	To		
		Month/Year	Month/Year		
Address Of Employer:					
Type Of Organisation:	Nam	e Of Supervisor			
No And Kind Of Employees	Supervised By You :				
Reason Of Leaving:					
Description Of Duties :					

8. COMPUTER LITERACY

Word	⊠Excellent	Good	Average	
Excel	🛛 Excellent	Good	Average	
E-mail	🛛 Excellent	Good	Average	
PowerPoint	🛛 Excellent	Good	Average	

9. LANGUAGE SKILLS

ENGLISH			
Spoken	🛛 Excellent 🗌	Good	Basic
Read	🛛 Excellent 🗌	Good	Basic
Written	🛛 Excellent 🗌	Good	Basic
FRENCH			
Spoken	Excellent	Good	Basic
Read	Excellent	Good	Basic
Written	Excellent	Good	Basic

Proficiency in other languages: Yes⊠ No□

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	5 of 7



Please specify language(s): Swahili

Please specify level of Proficiency: Native speaker

- 10. When you look over your career, of the organisations you have so far worked for, which did you enjoy the most and why?
- 11. What are your major skills and behavioural characteristics that can be assets to the post you have applied for?
- 12. What are your expectations from the post you have applied for?

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	6 of 7



REFEREES

List the name of the three persons, not related to you and are not under current COMESA staff members, who are familiar with your character and qualifications

FULL NAME	FULL ADDRESS	BUSINESS OCCUPATION	PHONE NUMBER

- 13. Any other comment you would like to add:
- 14. I, ------ certify that the statements made by me to answer the foregoing questions are true and complete to the best of my belief. I understand that any misrepresentation or material omission made on this form may render my application to termination.

Date:_____

Signature:_____

Issue/RevisionNo.	01/00	Prepared by	Page
Date	26-Mar-03	Approved by	7 of 7