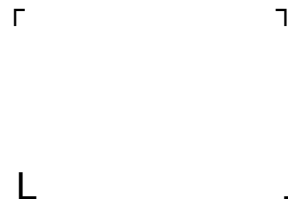




PAPUA NEW GUINEA CUSTOMS SERVICE
APPLICATION FOR EMPLOYMENT



PLEASE COMPLETE IN FULL IN BLOCK LETTERS USING BLACK OR BLUE INK OR IN
 TYPESCRIPT

RECENT PHOTOGRAPH

POSITIONS APPLIED FOR					POSITION NUMBER
NAME: Surname				Given Names	
				<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE
NAME AT BIRTH (if different)		ANY OTHER NAMES USED			
DATE OF BIRTH / /	PLACE OF BIRTH	DISTRICT/CITY	PROVINCE/STATE	COUNTRY	
CITIZENSHIP		If naturalised Citizen, Nationality at birth:			
MARITAL STATUS	<input type="checkbox"/> MARRIED <input type="checkbox"/> SINGLE		<input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED		<input type="checkbox"/> WIDOWED
If married	Date of Marriage/...../.....	Spouse's Employer		Spouse's File Number (if Govt. employed)	
HAVE YOU ANY CHILDREN? If yes, give details below					
NAME		MALE/FEMALE		DATE OF BIRTH	
1.....		.....		.....
2.....		.....		.....
3.....		.....		.....
4.....		.....		.....
5.....		.....		.....
6.....		.....		.....
7.....		.....		.....
PERMANENT ADDRESS				TELEPHONE No :	
PRESENT ADDRESS (if Different)		until	...../...../.....	TELEPHONE No :	

PLACE OF RESIDENCE LAST FIVE YEARS (Other than vacation)	FULL POSTAL ADDRESS	DATES
/...../.....
	.....	to
/...../.....
	.....	to
...../...../.....	

SECONDARY EDUCATION

SCHOOL:		SCHOOL:	
Name of Examination	Year Passed	Name of Examination	Year Passed
SUBJECT	Result	SUBJECT	Result
.....
.....
.....
.....
.....

TERTIARY EDUCATION

UNIVERSITY, COLLEGE	
COURSE	
DURATION	TO
QUALIFICATION OBTAINED	

Give details of ALL branches of subject taken:

SUBJECT		SUBJECT	
YEAR 1		YEAR 3	
YEAR 2		YEAR 4	

ADDITIONAL QUALIFICATIONS, FURTHER STUDY, RESEARCH

PUBLICATIONS	
PRIZES, SCHOLARSHIPS, etc	
MEMBERSHIP OF LEARNED SOCIETIES OR INSTITUTES (Give date of admission and level of membership)	

EMPLOYMENT RECORD

PRESENT POSITION OR LATEST POSITION HELD		DESCRIPTION OF WORK, INCLUDING SUPERVISORY DUTIES
Name and Address of Employer		.....
Title of Job		.....
Period	/ / to / /	.....
Present Salary..... If on Salary Range, please state range:.....		.....
PREVIOUS POSITION HELD - in reversed consecutive order		
Name and Address of Employer		.....
Title of Job		.....
Period	/ / to / /	.....
Name and Address of Employer		.....
Title of Job		.....
Period	/ / to / /	.....
Name and Address of employer		.....
Title Of Job		.....
Period	/ / to / /	.....
Name and Address of Employer		.....

Title of Job			
Period	/ / to / /		
Name and Address of Employer			
Title of Job			
Period	/ / to / /		
CIVIC ACTIVITIES, CLUBS/ SOCIETIES			
INTERESTS, SPORTS/ RECREATION			
CLOSE RELATIVES	FULL NAME (including maiden name)		DATE OF BIRTH
	FATHER		
	MOTHER		
	SPOUSE		
SERVICE IN THE ARMED FORCES	BRANCH OF SERVICE :		
	RANK :		DATE OF ENLISTMENT:/...../.....
	DATE DISCHARGED: / /		REASON:
<p>Have you been convicted of an offence? If YES, give details.</p> <input type="checkbox"/> NO <input type="checkbox"/> YES			
PREVIOUS APPLICATIONS FOR POSITIONS IN PAPUA NEW GUINEA	Position	Authority	Date
<p>REFERENCES: Name four persons who can comment on your academic work or on your professional experience. Before nominating them you should have their permission to give their names. We will wish to approach referees before interview. If , however, an approach to any particular referee is inconvenient at present, please indicate:*</p>			
Name and Position	Relevance	Address	Tel. No.
1.			
2.			
3.			
4.			
If applying for an advertised vacancy, journal in which advertisement seen:			

NOTE: THE DISCOVERY OF ANY INCORRECT OR MISLEADING STATEMENT OR DELIBERATE OMISSION COULD RENDER ANY EMPLOYMENT OR CONTRACTUAL AGREEMENT VOID WITHOUT COMPENSATION OR REPATRIATION

SIGNATURE:

OFFICE USE ONLY

Notice.....weeks

M/C Sighted.....

Acc. Sit Exp.....

BC Sighted.....

N/C Sighted.....