

NAROK COUNTY PUBLIC SERVICE BOARD

APPLICATION FOR EMPLOYMENT FORM

Please complete all sections of this form as appropriate in **BLOCK** letters and submit to the Secretary, County Public Service Board, P.O.BOX 545, 20500 NAROK, KENYA.

Personal Details of the Applicant Name:	
Ministry: 2. Personal Details of the Applicant Name: (Surname) First Name Other Name(s): (Prof/De/Mr/Mrs/Mss/Ms Date of Birth	
Personal Details of the Applicant Name:	
Name:	
County Constituency Constituen	
Nationality:	/Rev)
Sub County	male
Postal Address:	
Telephone No:	
Name of alternative contact person: Are you living with a disability? Yes No If yes, give; (i) Details/Nature of Disability: (ii) Details of Registration with the National Council for People with Disabilities (Registration No. and date)	
Are you living with a disability? Yes No Details yes, give; (i) Details/Nature of Disability:	
If yes, give; (i) Details/Nature of Disability:	
(ii) Details/Nature of Disability:	
3. Applicants in the Public Service only Ministry/State Department/ County/Other Public Institutions:	
Ministry/State Department/ County/Other Public Institutions: Station: Personal/Employment No: Present Substantive Post: Job group/Scale/Grade: Date of Current Appointment (dd-mm-yyyy). Upgraded post (where applicable): effective date of previous appointment: (dd-mm-yyyy) On Secondment (where applicable):Organisation: Designation: Job Group/G Other, Please specify:	
Personal/Employment No:	
Job group/Scale/Grade:	
Upgraded post (where applicable): On Secondment (where applicable):Organisation: Designation: Other, Please specify: Terms of Service: Permanent & Pensionable Contract Other, Please specify:	
On Secondment (where applicable):Organisation: Designation: Job Group/G Terms of Service: Permanent & Pensionable Contract Contract	
Terms of Service: Permanent & Pensionable Contract Other, Please specify:	
Terms of Service: Permanent & Pensionable Contract	rade:
A All other Applicants	
4. All other Applicants	
Current employer (where applicable):	
Ksh	
Our E-mail: ncpublicserviceboard@gmail.com	

5 Other Personal Details									
5. Other Personal Details									
Have you ever been convicted of any criminal offence or a subject of probation order? Yes No									
If Yes, state nature of offence, the year and duration of conviction									
Have you ever been dismissed or otherwise removed from employment? Yes No									
If Yes, State	reason (s) fo	or dismissal/removal				ef	fective dat		
								(dd-mm-yyyy)	
(Declaring considered of		formation will not necessa erit)	rily debar	an applicant	t from employment in the	e Public Service. Ed	ich case w	ill be	
6 Academi	c Qualifica	ations. (Starting with th	e Highes	t)					
				Attainment					
Ye	ear	University/ High School	(e.g. Ma			Specialization/Subject (e. g Econ, Maths, Sociology e.t.c)		Class/Grade	
_	_	riigii School	KCSE)						
From	То								
7 Professio	nal/Techn	ical Qualifications/Cert	ification	s Relevant	to the post. (Starting	with the Highest)		
Ve	ar					Specialization/Su	hiect		
Year Institution			Award/Att	tainment er Diploma, Diploma,	(e. g Human Reso Engineering, Cou	Class/Grade			
From	То			Certificate	2)	e.t.c)	mseming		
8 Relevant Courses and Training attended Lasting not Less than One (1) Week									
Voor	Universe	sity/Collogo/Institution		,	Name of Course		Dataila a	nd duration	
Year	Univers	sity/College/Institution		1	Name of Course		Details a	na auration	
Our E-mail:	ncpublicserv	viceboard@gmail.com							

rofessional B	Body	Membership/Registration No.	Membership type (e.g. Associate, Full etc)		Date of Renewal		
Employmer	nt Details - wh	ere applicable (starting with the					
Year		Designation/ Position		Job Group/Grade /Scale Minis Gross Monthly Salary (Ksh.)		stry/State Department/ ution/ Organization	
From d-mm-	To (dd-mm-						
уууу)	yyyy)						
Briefly state	your current dut	ies, responsibilities and assignments (if any)				
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			•••••				
					• • • • • • • • • • • • • • • • • • • •		
					•••••		
Please give d	etails of your abi	ilities, skills and experience which yo	u consider	relevant to the positi	on appli	ed for. This information may	
		st recent achievements and your reason				•	
	•••••		•••••		•••••		

13. Referees (people who have interacted with you prob	(Costonally)
1. Full Name:	
Occupation:	
Address:	st Code:City/Town:
Mobile No:	E-mail address:
Period for which the referee has known you:	
2. Full Name:	
Occupation:	
Address: Post	Code:City/Town:
Mobile No:	E-mail address:
Period for which the referee has known you:	
13. Declaration	
I certify that the particulars given on this form are correct and un disqualification and/or legal action.	
Date:(dd-mm-yyyy)	Signature of the Applicant
Our E-mail: ncpublicserviceboard@gmail.com	