



**PLEASE ATTACH
RECENT
PHOTOGRAPH
HERE**

SIR ARTHUR LEWIS COMMUNITY COLLEGE APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT IN INK

POST APPLIED FOR:

1. SURNAME: CHRISTIAN NAME(S):
2. POSTAL ADDRESS:
.....
3. HOME ADDRESS:
.....
4. TELEPHONE NO. {WORK} {HOME}
{CELL}
5. EMAIL ADDRESS:
6. PLACE OF BIRTH: 7. DATE OF BIRTH:
day.. / ...month... / year
8. NATIONALITY: 9. SEX: MALE { } FEMALE { }
10. MARITAL STATUS: 11. RELIGION:
12. NUMBER AND AGES OF CHILDREN:
13. ID/PASSPORT NUMBER:
14. EDUCATION:

| EDUCATION | YEARS ATTENDED | |
|------------------|----------------|--|
| PRIMARY | | |
| SECONDARY | | |
| TERTIARY | | |

15. QUALIFICATIONS: (SUBMIT CERTIFIED PHOTOSTAT COPIES OF CERTIFICATES AND DIPLOMAS)

ACADEMIC:

| INSTITUTION | YEARS ATTENDED | | SUBJECTS STUDIED | CERTIFICATES/DIPLOMAS OBTAINED |
|-------------|----------------|--|------------------|--------------------------------|
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PROFESSIONAL:

| INSTITUTION | YEARS ATTENDED | | MAIN COURSE OF STUDY | DEGREES AND ACADEMIC DISTINCTIONS OBTAINED |
|-------------|----------------|--|----------------------|--|
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NOTWITHSTANDING ANY RESUME ATTACHMENT, PAGES 2 TO 3 OF THE APPLICATION FORM MUST BE COMPLETELY FILLED.

EMPLOYMENT HISTORY:

| PRESENT OR MOST RECENT POST | | | | BRIEFLY DESCRIBE YOUR WORK |
|--|------|-------|------|----------------------------|
| FROM | | TO | | |
| MONTH | YEAR | MONTH | YEAR | |
| TITLE OF POST: | | | | |
| TYPE OF BUSINESS/SUBJECTS TAUGHT: | | | | |
| NAME AND ADDRESS OF EMPLOYER: | | | | |
| NAME OF HEAD OF DEPARTMENT: | | | | |
| REASONS FOR LEAVING, IF APPLICABLE: | | | | |
| SALARY: | | | | |

| | | | |
|--|-------------|--------------|-------------|
| PREVIOUS POST | | | |
| FROM | | TO | |
| MONTH | YEAR | MONTH | YEAR |
| TITLE OF POST: | | | |
| TYPE OF BUSINESS/SUBJECTS TAUGHT: | | | |
| NAME AND ADDRESS OF EMPLOYER: | | | |
| NAME OF HEAD OF DEPARTMENT: | | | |
| REASONS FOR LEAVING, IF APPLICABLE: | | | |
| SALARY: | | | |

| | | | |
|--|-------------|--------------|-------------|
| PREVIOUS POST | | | |
| FROM | | TO | |
| MONTH | YEAR | MONTH | YEAR |
| TITLE OF POST: | | | |
| TYPE OF BUSINESS/SUBJECTS TAUGHT: | | | |
| NAME AND ADDRESS OF EMPLOYER: | | | |
| NAME OF HEAD OF DEPARTMENT: | | | |
| REASONS FOR LEAVING, IF APPLICABLE: | | | |
| SALARY: | | | |

16. List any other relevant experiences/interests.

.....

.....

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17. PERSONAL REFERENCES

Give names and addresses of two (2) persons who have known you at least five (5) years and who have agreed to be used as references.

| FULL NAME | ADDRESS | BUSINESS/ OCCUPATION |
|-----------|---------|----------------------|
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18.
SIGNATURE DATE

19. APPLICATION FORMS IN DUPLICATE SHOULD BE ADDRESSED TO:

Human Resource Manager
Sir Arthur Lewis Community College
Morne Fortune, Castries
St. Lucia, West Indies