



# DEPARTMENT OF INFORMATION

## APPLICATION FORM

Position Applied For:		Vacancy or Reference Number:	
Title:	Surname/Family Name:		
Given Names:			
Date of Birth:			
Postal Address:			
Residential Address:			
<i>(If different than postal)</i>			
Email address:			
Home:		Mobile:	
Phone (alternate):	Are you a Fiji Citizen	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Gender information is gathered for statistical purposes only & not for assessment purpose.	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
<b>Referee Details (please include only referees who can comment on your work experience)</b>	<b>Contact Details</b>		
Name:	Phone:		
Organisation:	Email:		
Position:	Relationship:		
Name:	Phone:		
Organisation:	Email:		
Position:	Relationship:		
Name:	Phone:		
Organisation:	Email:		
Position:	Relationship:		

**Please ensure you attach your current Curriculum Vitae explaining your suitability for the position and your birth certificate.**

I certify the above details are true and correct and that I am a genuine applicant for the identified position

Signature: .....

Date: .....



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### DECLARATION AND AUTHORISATION:

I \_\_\_\_\_

(Full name: first or given names and family or surname)

of \_\_\_\_\_

(Full residential address)

Being an applicant for \_\_\_\_\_ position in the Department of \_\_\_\_\_ declare that:

- I have not been convicted of any criminal offences (for these purposes do not count any infringement offences, e.g., parking or speeding offences, as they do not result in a conviction being entered against you)

**I acknowledge that if appointed, I will have to provide a recent police clearance before taking up duty.**

- I have not been the subject of any disciplinary action by any employer or professional body in Fiji or overseas, nor are there any unresolved complaints against me

**OR**

Details of disciplinary action or unresolved complaints against me are as follows

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- I have not been made bankrupt, entered into a composition with my creditors, or been disqualified as a director.
- I know of no other matter which might affect my credibility in office.
- I understand and consent to my application form, my curriculum vitae and any other material supplied being held by the Department of \_\_\_\_\_ being used to assess whether I may be employed in the Fiji Civil Service.
- I authorise the Fiji Government to make suitable enquiries to verify the information supplied in my application.
- I understand that a false declaration on this form will invalidate my application and may result in further legal action being taken against me.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_