



# Job Application Form

## Form 2

Form must be completed by Applicant whether Public Servant or Non Public Servant

### Section 1: Position Details

|                           |  |                                      |                         |
|---------------------------|--|--------------------------------------|-------------------------|
| Ministry<br>MCIL          | Section<br>RCIP  | Location<br>ACC LEVEL 4              |                         |
| Position Code<br>CL002392 | Title<br>Inspector of Companies and Cooperatives Societies | Supervisor Position Code<br>CL002443 |                         |
|                           |  | Salary Grade<br>A8                   | Salary Rate<br>\$17,344 |

### Section 2: Personal Details

|                 |                       |                       |
|-----------------|-----------------------|-----------------------|
| First Name:     | Last Name:            | Other Names:          |
| Gender:         | Date of Birth:        | NPF No:               |
| Marital Status: | Physical Address (1): | Physical Address (2): |
| Post Code:      | Phone No (1):         | Phone No (2):         |
| e-Mail:         | Facimile:             |                       |

### Section 3: Education Details

| Most recent qualification | Major Area of Study | Institution Attended | Date Started | Year Graduated |
|---------------------------|---------------------|----------------------|--------------|----------------|
|                           |                     |                      |              |                |
|                           |                     |                      |              |                |
|                           |                     |                      |              |                |
|                           |                     |                      |              |                |
|                           |                     |                      |              |                |
|                           |                     |                      |              |                |

### Section 4: Training History

| Courses Relevant to Selection Criteria ONLY | Institution/Country | Dates |
|---|---------------------|-------|
|   |                     |       |
|   |                     |       |
|   |                     |       |
|   |                     |       |
|   |                     |       |
|   |                     |       |
|   |                     |       |

## Section 5: Employment History

### Current / Most recent Position

|                              |   |                 |
|------------------------------|---|-----------------|
| <i>Employer's Name</i>       | <i>Date</i>                             | <i>Duration</i> |
| <i>Position Title</i>        | <i>Number of Staff reporting to you</i> |                 |
| <i>Main Responsibilities</i> |   |                 |

### Next previous position

|                              |   |                 |
|------------------------------|---|-----------------|
| <i>Employer's Name</i>       | <i>Date</i>                             | <i>Duration</i> |
| <i>Position Title</i>        | <i>Number of Staff reporting to you</i> |                 |
| <i>Main Responsibilities</i> |   |                 |

### Next previous position

|                              |   |                 |
|------------------------------|---|-----------------|
| <i>Employer's Name</i>       | <i>Date</i>                             | <i>Duration</i> |
| <i>Position Title</i>        | <i>Number of Staff reporting to you</i> |                 |
| <i>Main Responsibilities</i> |   |                 |

### Next previous position

|                              |   |                 |
|------------------------------|---|-----------------|
| <i>Employer's Name</i>       | <i>Date</i>                             | <i>Duration</i> |
| <i>Position Title</i>        | <i>Number of Staff reporting to you</i> |                 |
| <i>Main Responsibilities</i> |   |                 |

## Section 6: Selection Criteria

Based on an analysis of the duties of this position as determined by the Manger responsible, set out below are the criteria that will be used in assessing the suitability of each Applicant for the position. Please address each selection criteria on a separate sheet and attach to this form.

### It is the Applicant's responsibility to:

1. indicate aspects of their work experience which indicate their ability to satisfy each criterion;
2. complete this information in a true and accurate way (failure to do so will disqualify the Applicant); and
3. supply supporting documentation should they be called for short-listed interviews.

**Note: If you feel the need to supply additional arguments to support your fulfilment of the selection criteria listed below then please attach that information to this application form.**

### MERIT FACTORS (Job Competencies)

|   |
|---|
| <b>1. Skills and Abilities (refer to JD for full details)</b>   |
| Problem Solving, Communications, Report Writing, Interpersonal Skills, Computer literate  |
| <b>2. Personal Attributes (refer to JD for full details)</b>  |
| Commitment & Drive, Intergrity and Honesty  |
| <b>3. Experience and Past Work Performance (refer to JD for full details)</b>   |
| Demonstrate knowledge in registration and assessing of applications. Awareness of the registries of companies and cooperatives societies. |
| <b>4. Qualifications (refer to JD for full details)</b>   |
| Tertiary Qualification in Commerce or relevant discipline   |

## Section 7: Computer Literacy

Indicate competency level for each Application

Competency Level code: 1= no knowledge; 2= basic knowledge; 3= good working knowledge; 4= strong/advanced capabilities

| Main Applications       |  | Other Systems                |  |
|-------------------------|--|------------------------------|--|
| Word processing (Word)  |  | Database Management (Access) |  |
| Spreadsheets (Excel)    |  | Other (specify)              |  |
| Presentation PowerPoint |  | Other (specify)              |  |
| E-mail                  |  | Other (specify)              |  |

## Section 8: Knowledge of Languages

For languages other than your mother tongue, enter appropriate number from code below to indicate level of your language skills

| CODE<br>1. Limited conversation, reading of newspapers, routine correspondence<br>2. Engage freely in discussions, read write more difficult materi<br>3. Speak, read and write (nearly) as well as mother tongue. | Indicate your mother tongue by ticking a box below |        |  | Speak | Read | Write |
|--|--|--------|--|-------|------|-------|
|  |  | Samoan |  |       |      |       |
|  | English  |        |  |       |      |       |
|  | Other (specify)                                    |        |  |       |      |       |

## Section 9: Discipline Records Check

Do you have a discipline record; any criminal convictions; or any current legal proceedings against you? (Please TICK the appropriate box)

No

Yes

IF Yes, Please provide details on a separate piece of paper in a sealed envelope and attach it to this form. This information will be kept confidential and only be seen by the Assessment Committee.

## Section 10: Declaration of Referees

Please note that you need to declare addresses and contact numbers of three referees.

| Referee Name | Designation | Address/Contact Numbers |
|--------------|-------------|-------------------------|
| 1.           |             |                         |
| 2.           |             |                         |
| 3.           |             |                         |

## Section 11: Declaration of Close Relations

Do you have a close relation (family ties) to an individual(s) currently employed anywhere in the Ministry to which you are applying? (Please TICK the appropriate box)

No

Yes

If YES, please provide name(s) of your relation(s) and state nature of relationship

|  |  |
|--|--|
|  |  |
|  |  |

**Section 12: Community Status**

Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list:

|  |  |
|--|--|
|  |  |
|  |  |

**Section 13: Certification And Authorisation**

I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|