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| C:\Users\user\Pictures\Saved Pictures\PHOTO-2019-06-07-17-29-54.jpg**APPLICATION FOR EMPLOYMENT FORM** Please complete all sections of this form as appropriate in **BLOCK** letters and submit to the **Chairman,****Coast Water Works Development Agency, Mikindani Street, Off Nkrumah Road,****P.O Box 90417-80100 Mombasa** or send via email to **chairman@cwwda.go.ke**All sections of this form must be completed in full and submitted together with attached complete curriculum vitae and copies of certificates and testimonials. |
| **1. Vacancy Applied For**  |     |
|  **`**   Vacancy/Post: ………………………………………………………………………….....................................................................................………....  |
|  **2. Personal Details of the Applicant**  |
|  Name: ……………………………….….....………..………….…..……..… ……………………………… ...... Title:…………………… (Surname) First Name Other Name(s): (Prof/Dr/Mr/Mrs/Miss/Ms/Rev)

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Date of Birth............................................... ID No:………………….. PIN. No.. ............................Gender: Male Female Intersex (dd-mm-yyyy) Nationality:………………………………..............Ethnicity................................................ Home County:…………………………………............Sub County ............................................................................................Constituency:...................................... .................................................................Postal Address:…………………………………………… Code:………………………………….. Town/City: ………………………....................... Telephone No:……………………………………Mobile No:………………………………E-mail address:…………......…….…….………............. Name of alternative contact person:……….………………......................................................Telephone No:……………………………........................ Are you living with a disability? Yes No If yes, give;  1. Details/Nature of Disability:………………………………………………………………………………………………...………………….........
2. Details of Registration with the National Council for Persons Living with Disabilities (Registration No. and date)......................................................

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|  **3. 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) for dismissal/removal…………………..…………………………………………………….….effective date……………… (dd-mm-yyyy) ***Declaring the above information will not necessarily debar an applicant from employment in the Institute. Each case will be considered on its own merit)***    |

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| **4. Academic Qualifications. (Starting with the Highest level)**  |
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|   **Year**  |  **University/** **High School**  | **Award/Attainment** **(e.g. Masters,** **Bachelors, Degree,** **KCSE)**  | **Course/Programme** **(e.g. PhD, MSc, BA,** **O’Level)**  | **Specialization/Subject** **(e. g Econ, Maths,** **Sociology e.t.c)**  |   **Class/Grade**  |
| **From**  | **To**  |   |   |   |   |   |
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| **5. Professional/Technical Qualifications/Certifications Relevant to the post. (Starting with the Highest level)**  |
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|  **Year**  |  **Institution**  | **Award/Attainment** **(e.g. Higher Diploma, Diploma,** **Certificate)**  | **Specialization/Subject** **(e. g Human Resource, Engineering, Counselling** **e.t.c)**  |   **Class/Grade**  |
| **From**  | **To**  |
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| **6. Relevant Courses and Training attended Lasting not Less than One (1) Week**  |
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|  **Year**  |  **University/College/Institution**  |  **Name of Course**  |  **Details and duration**  |
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|  **7. Current Registration/Membership to Professional Bodies**  |
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| **Professional Body**  | **Membership/Registration No.**  | **Membership type (e.g.** **Associate, Full etc)**  | **Date of Renewal**  | .... ..... .... ….... .. ... ... e  ..… ..… ..…   ....  |
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|  **8. Employment Details - where applicable (*starting with the current or most recent*)**   |
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|   **Year**   | **Designation/ Position**  | **Job Group/Grade /Scale** **Gross Monthly Salary (Ksh.)**  | **Institution/ Organization**  |
| **From (dd-mm- yyyy)**  | **To** **(dd-mm- yyyy)**  |   |   |   |
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| 1. Briefly state your current duties, responsibilities and assignments (if any)

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|  **11. Referees (people who have interacted with you professionally)**  |   .  .   |
| 1. Full Name:……………………………………………………………………………..………………………………………………………………...

Occupation:…………………………………………………………………………………...……………………………………………………………. Address:………………………………………………………Post Code:………………………………...City/Town: ………….................................... Mobile No:…………………………………………………………… E-mail address:………………………………………………………................. Period for which the referee has known you:………………………………………..……………………………………………………........................ 1. Full Name:……………………………………………………………………………….……………….……………………………………………... Occupation:………………………………………………………………………………………………..…………………………….………………….

Address:……………………………………………............ Post Code:……………………………….......City/Town: ………………………………...Mobile No:……………………………………………....................... E-mail address:……………………………………………………...................... Period for which the referee has known you:……………………………………………………………….…………………………………….……......   1. Full Name:……………………………………………………………………………….……………….……………………………………………... Occupation:………………………………………………………………………………………………..…………………………….………………….

Address:……………………………………………............ Post Code:……………………………….......City/Town: ………………………………...Mobile No:……………………………………………....................... E-mail address:……………………………………………………...................... Period for which the referee has known you:……………………………………………………………….…………………………………….……......  |
|  **12. Declaration**  |
| I certify that the particulars given on this form are correct and understand that any incorrect /misleading information may lead to disqualification and/or legal action. Date: ……………………………. …………………………….. (dd-mm-yyyy) Signature of the Applicant   |