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| . **CURRICULUM VITAE** |
|  **1. Personal Details**  |
| Name (Surname, first name, other names ) Title (Prof/Dr/Mr/Mrs/Miss/Rev) ­­  |
| Date of Birth.................................................. ID No:……………………….. Gender .......................................... PIN.NO. …………………… (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:………………………………………………………………………………………………...………………….........

 1. Details of Registration with the National Council for People with Disabilities (Registration No. and date)..................................................................

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| **2. Employment status (Applicants in the Public Service only)**  |
| 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/Grade:..........  Terms of Service: Permanent & Pensionable Contract Other, Please specify:.........................................................   |
|  **3. Employment status All other Applicants** |
|  Employer……………………………………………………………………………….. Current Designation ………………………………………………………………Date of appointmentTerms of Service: Permanent & Pensionable Contract Other, Please specify:.........................................................  |

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| **4. Other Personal Details**  |
|  Let us know whether you have ever been convicted of any criminal offence or a subject of probation order.  If Yes, state nature of offence, the year and duration of conviction ................................................................................................................................... ................................................................................................................................................................................................................................................ Let us know whether you have ever been dismissed or otherwise removed from your employment  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 Public Service. Each case will be considered on its own merit)***  |
| **5 Academic Qualifications. (Starting with the Highest)**  |
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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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| **6 Professional/Technical Qualifications/Certifications Relevant to the post. (Starting with the Highest)**  |
| **ademic /Professional/Technical Qualifications Relevant to the post. (Starting with the Highest)**  |
| **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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| **7. Other relevant Courses and Training**  |
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| **Year**  | **University/College/Institution**  | **Name of Course**  | **Details and duration**  |
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| **8. 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**  |  |
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| **9.** **Employment Details - where applicable (*starting with the current or most recent*)**  |
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| **From** **(dd-mm- yyyy)**  | **To** **(dd-mm- yyyy)**  |  |  |  |  |
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| 1. Current duties, responsibilities and assignments (if any)

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| **12. 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:……………………………………………………………….…………………………………….……......    |
| **13.** **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 App |