

COMESA COMPETITION AND CONSUMER COMMISSION

JOB APPLICATION FORM

Please answer each question clearly and completely. TYPE OR PRINT LEGIBLY. Read carefully and follow all directions. Use (✓) for any dialog boxes (□).

1. **POST APPLIED FOR :**

2. **DATE OF ADVERTISEMENT:**

3. PERSONAL HISTORY

Family Name:
First Names:
Maiden Name (if applicable):
Date of birth:
Place of birth:
Nationality at birth:
Present Nationality:
Sex:
Permanent address:
Present address:
Office phone number:
Cell phone number:
E-mail address(s):

4. Do you have any dependent children?

Yes No

If your answer is "Yes", give the following information :

(Note : You are allowed to input data up for a maximum of 4 dependent children)

Name of children	Date of birth (day/month/year)	Place of birth	Nationality	Gender

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5. QUALIFICATIONS:

EDUCATION, Give full details- N.B Please give exact titles of degrees in original language. Please do not translate or equate to other degrees.

A. UNIVERSITY OR EQUIVALENT			
Name, Place and Country	Attended from/to Month/ Year	Professional Certifications, Post Degrees, Degrees and academic; Distinctions Obtained	Main course of study

B. SCHOOLS OR OTHER FORMAL TRAINING		
Name, Place and Country	Attended from/to Month/ Year	Certificates Obtained

6. List any significant publications or papers you have written and which might be of relevance to the post being applied for.

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7. EMPLOYMENT RECORD

Please fill in details of your employment record below in chronological order, starting with your current or latest position first. Use a separate block for each post.

A. Present Post (Last Post, if not presently in employment)

Exact Title of Post	Name Of Employer	From Month/Year	To Month/Year
Address of Employer :			
Type of Organisation			
No. of Superiors to Whom You Report :			
No. and Categories of Employees Supervised by You :			
Salary Obtained:			
Description of Duties			
Any Job Problems:			

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How You Are Handling Them:

B. Previous Post

Exact Title of Post	Name Of Employer	From Month/Year	To Month/Year

Address of Employer :

Type of Organisation :

No. of Superiors to Whom You Report :
:

No and Kind of Employees Supervised by You :

Salary Obtained :

Reason of Leaving :

Description of Duties :

Any Job Problems and How You did you Handle them:

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C. Previous Post

Exact Title of Post	Name of Employer	From Month/Year	To Month/Year
Address of Employer:			
Type of Organisation		No. of Superiors to Whom You Report	
No and Kind of Employees Supervised by You :			
Reason of Leaving :			
Description of Duties :			

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D. Previous Post

Exact Title of Post	Name of Employer	From Month/Year	To Month/Year
Address of Employer :			
Type of Organisation		Name of Supervisor	
No and Kind of Employees Supervised By You :			
Reason Of Leaving :			
Description Of Duties :			

Note: If you have other Experiences of previous posts which you wish to add, you are advised to add Section E,F,G....as applicable.

8. COMPUTER LITERACY

Word	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Excel	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
E-mail	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
PowerPoint	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average

9. LANGUAGE SKILLS

ARABIC			
Spoken	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Read	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Written	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
ENGLISH			
Spoken	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Read	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Written	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
FRENCH			
Spoken	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Read	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average
Written	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average

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Proficiency in other languages: Yes No

Please specify language(s): _____

Please specify level of Proficiency: _____

10. When you look over your career, of the organisations you have so far worked for, which did you enjoy the most and why?

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11. What are your major skills and behavioural characteristics that can be assets to the post you have applied for?

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12. What have you achieved in your career that demonstrates your mastery of these skills?

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13. What are your expectations from the post you have applied for?

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14. REFEREES

List the name of the three persons, not related to you and are not under current COMESA staff members, who are familiar with your character and qualifications

Table with 4 columns: FULL NAME, FULL ADDRESS/EMAIL, BUSINESS OCCUPATION, CELL PHONE NUMBER. It contains three empty rows for data entry.

15. Any other comment you would like to add:

Series of horizontal dotted lines provided for writing additional comments.

16. I, Mr/Mrs certify that the statements made by me to answer the foregoing questions are true and complete to the best of my belief. I understand that any misrepresentation or material omission made on this form may render my application to termination.

Date: _____

Signature: _____