

COUNTY GOVERNMENT OF SIAYA



SIAYA COUNTY PUBLIC SERVICE BOARD
P.O.BOX 390, 40601, BONDO ♦ TEL: +254739111117, +254710383877
EMAIL: infopsb@siaya.go.ke ♦ WEBSITE: www.cpsb.siaya.go.ke
application_cpsb@siaya.go.ke

All Correspondences should be addressed to the Secretary to the Board

Please download and complete this form in **BLOCK** letters as appropriate and submit to the Secretary/CEO or email us at application_cpsb@siaya.go.ke

1. Vacancy Applied For

Vacancy/Post:.....

Department:.....

2. Personal Details

Name of Applicant:.....

Surname

First Name

Other names

Date of Birth (As contained in Birth Certificate):..... Gender : Male Female

Birth Certificate (Entry Number)KRA PIN No:.....

Nationality..... ID No:.....

County Sub County

Ward Mobile No

Tribe:

Postal Address.....

Email Address.....

Alternative Contact Person's Name.....

Relationship..... Contact:.....

3. Applicants in the Public Service Only

County/Department/Other Public Institutions

Online applications to be scanned and sent to application_cpsb@siaya.go.ke

Station _____ Present Substantive Post

Job Group _____ Effective Date

Upgrading (if applicable) _____ Effective Date

Years of Experience

Terms of Service: Permanent & Pensionable Contract Temporary

4. Applicants in Private/NGO/Other Sectors

Current Employer Position Held

Effective Date: Salary:

Years of Experience:

5. Other Details

Indicate the language you are proficient in

Do you suffer from any Physical Impairment? Yes No

If yes give details

Have you ever been convicted of any criminal offences or a subject of probation order? No

If yes give Details

Have you ever been dismissed or otherwise removed from employment? Yes No

If Yes, State reason(s) for dismissal/removal

.....

..... Effective Date:

Have you ever been interviewed by the Siaya County Public Service Board? Yes No

If Yes, State the Post: Date Interviewed

(Declaring the above information will not necessarily debar an applicant from employment in the County Public Service, each case will be considered on its own merit)

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7. Other Relevant Courses and Training /Registration/Membership to Professional Bodies/Institution

Year	Institution/College	Courses	Details

8. Employment Details (Starting with the most RECENT)

Year		Employers Name	Position Rank/Designation	Job Group/Gross Monthly Salary (Kshs)
From	To			

11. Personal References

The names of distinguished persons should not be used unless they really know you well; the names of relatives or of those of whom you send testimonials should not be used. The names of members or staff of the County Public Service Board of Siaya should also not be used.

- i) Full Name:.....
Address:..... Email:.....
Telephone: Occupation:
Period of which he/she has known you:
- ii) Full Name:.....
Address:..... Email:.....
Telephone: Occupation:
Period of which he/she has known you:
- iii) Full Name:.....
Address:..... Email:.....
Telephone: Occupation:
Period of which he/she has known you:

DECLARATION:

I hereby certify to the best of my knowledge that the particulars given on this form are correct and I understand that any incorrect information may lead to disqualification/legal action;

Date:_____Signature of the applicant

FOR OFFICIAL USE ONLY

- 1. Candidate has been: Shortlisted Not Shortlisted
- 2. If not state reasons:

Name:.....

Date:..... Signature:.....