JOB APPLICATION FORM



				1. PO	SIT	ION				
Application (Position n	n for ame):									
2. PERSONAL DETAILS										
Title:			Surnan	ne						
Full Names	:						Date	of Birth:		
Nationality	:						Pass	port No:		
Physical Ad	ldress:									
	Cell:			Home:				Office:		
Contacts:	Alt Cell:			Email(s):						
Emergency	Contact	Details								
Name:	-									
Relationshi	ip:			Cell						
Work:										
Are you livi	ing with a	any disa	bilities?						Yes	No
If yes, pleas	se specify	y:								
Have you e	ver been	convicte	ed of anv	crime?	Yes					
					No	:				
If yes pleas	e explain	in the s	space pro	ovided.						



3. DETAILS OF RELEVANT WORK EXPERIENCE									
Current En	nployment Inf	ormation							
Current									
employer:									
Employer address:	Email:			Tel:					
	Email:			Tel:					
Position (s)	:								
Duration:	Start date:			End Date	:				
	I	1	I						
Duties (Pleas	se list all informa	tion that pertains t	o what you do, at l	least sevei	n (7) duties):				
0									
0									
0									
0									
0									
0									
0									
0									
0									
0									
0									
0									
List of Achievements									



Previous Em	ployment Info	ormation				
А.						
Previous Employer 1:						
Employer address:						
address:	Email:			Tel:		
Position (s):						
Duration:	Start date:			End Date	:	
Duties (Please	list all informatio	on that pertains	to what you do, at le	ast seven (7) duties):	
0						
0						
0						
0						
0						
0						
0						
0						
0						
0						
0						
0						
List of Achiev	ements					

							Revenu Service
В.							Lesotho
Previous Employer 2:							2000010
Employer address:	Email:]	ſel:		
Position (s):							
Duration:	Start date:			Fr	nd Da	te'	
Duties (Please		ation that pert	ains to what	Į			es):
				, ou uo, ut iou			
List of achieve	ments (if any):					



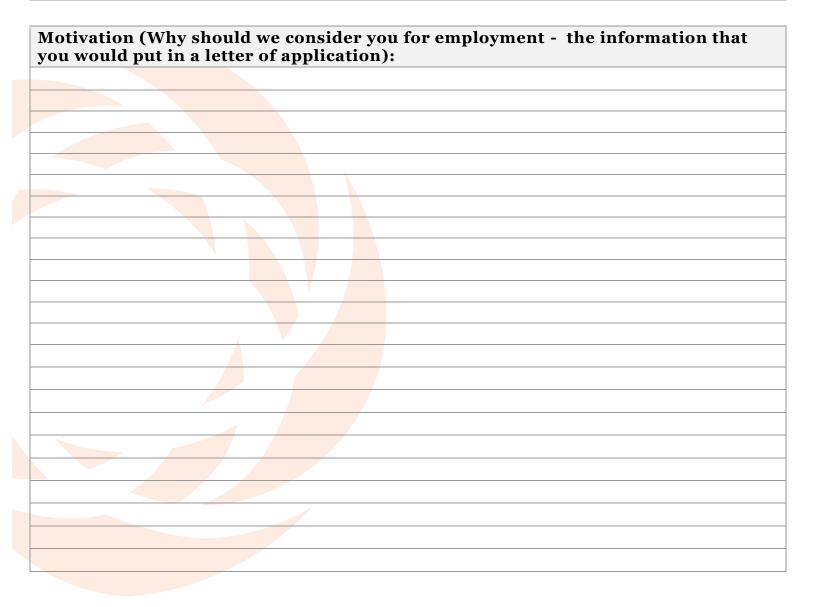
4. EDUCATIONAL BACKGROUND									
TERTIARY A.									
Qualifications									
				From		То			
College/ University									
Oniversity	Country			Comple	eted?				
Major (s)									

TERTIARY B.						
Qualifications						
			From		То	
College/ University						
University	Country		Comple	eted?		
Major (s)						

TERTIARY C.								
Qualifications								
					From		То	
College/ University								
University	Countr	·y			Comple	eted?		
Major (s)								

HIGH SCHOOL									
Certificate Level									
				From		То			
College/School									
	Country			Comple	eted?				
Major (s)									







2. REFERENCES								
Reference 1.								
Full Names:								
Occupation								
Institution		Tel						
	Cell (s):							
Ref Contacts:	Email							
Reference 2.								
Full Names:								
Occupation								
Institution		Tel						
DefContector	Cell (s):							
Ref Contacts:	Email							

3. ADDITIONAL INFORMATION:

Any other information that you think can be useful to the RSL:



I, _____, authorise Revenue Services Lesotho to verify all information provided in this form.

Signature/ Name of Applicant

Date