

APPLICATION FOR EMPLOYMENT

(Please answer all questions)

PERSONAL INFORMATION	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Surname: _____	First Name: _____
Other Name(s): _____	Home Address: _____ _____
Telephone Nos. _____ // _____ // _____ home cell work	Date of Birth: _____ // _____ // _____ dd mm yy
Nationality: _____	Medical: Do you have any physical, mental or medical impairment or disability that could limit your ability to perform the job for which you have applied? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain): _____ _____
Are you prepared to undergo a medical examination? <input type="checkbox"/> No <input type="checkbox"/> Yes	

EMPLOYMENT INFORMATION (CURRENT EMPLOYER FIRST)					
Name of Employer	Period		Position Held	Reason for Leaving	Salary (\$)
	From	To			
Other:					
Were you ever employed/interviewed by the EXIMBANK? <input type="checkbox"/> No <input type="checkbox"/> Yes (Give details): _____ _____					
Do you have any relatives employed with EXIMBANK? <input type="checkbox"/> No <input type="checkbox"/> Yes (Give details): _____ _____					
Position applied for: _____					
Salary desired: _\$ _____			Availability: _____		

EDUCATION			
SECONDARY			
Name of School	Period		Certificates Achieved
	From	To	
TERTIARY			
UNIVERSITY			
Other:			
Languages: _____			
Qualifications/Skills/Membership of professional associations, etc: _____			

REFERENCES			
(PLEASE NAME TWO REFERENCES OTHER THAN RELATIVES OR CASUAL ACQUAINTANCES)			
Name	Occupation	Address	Telephone No.

DECLARATION:

I declare that to the best of my knowledge, the above information is true. I understand that should any of the information given prove to be false, the Company may terminate my services immediately.

Signature of Applicant

Date

FOR OFFICIAL USE ONLY:

Interview date: _____

interviewers: _____

Comments: _____
