



APPLICATION FOR EMPLOYMENT

Please type or print in block letters and in black ink

Job title in announcement	Date of Application	Announcement Number
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1. BACKGROUND

Full Name				
First	Middle	Last	Previous, if any	
Permanent Address				
Name	Street Name	District & Code	Island	Atoll
Present Address (If different from above)				
Name	Street Name	District & Code	Island	Atoll
Contacts				National ID Number
Home Telephone	Office Telephone	Email		
Are you a Maldives citizen ? YES [] NO [] ▶ Give the country of your citizenship				How did you learn about this position?
Date of Birth	Marital Status	State of Health (mention any disability)		

2. EDUCATION AND TRAINING

Secondary Education

Name and Complete Address of Schools Attended	From		To		Graduate	
	Mo.	Yr.	Mo.	Yr.	Yes	No

Secondary School Certificate Examination and Ordinary Level or equivalent Examinations Results

Subjects Name	Date		Result	Subjects Name	Date		Result
	Mo.	Yr.			Mo.	Yr.	
DHIVEHI							
ISLAM							
ENGLISH							
MATHEMATICS							

Higher Secondary Education

Name and Complete Address of Schools Attended	From		To		Graduate	
	Mo.	Yr.	Mo.	Yr.	Ye s	No

Higher Secondary School Certificate Examination and Ordinary Level or equivalent Examinations Results

Subjects Name	Date		Result	Subjects Name	Date		Result
	Mo.	Yr.			Mo.	Yr.	
DHIVEHI							
ISLAM							
ENGLISH							

Tertiary Education

Name and Complete Address of Schools Attended	From		To		Graduate		Year Graduated	Type of Degree	Major Subjects	Minor Subjects
	Mo.	Yr.	Mo.	Yr.	Ye s	No				
High School										
College/University										
Graduate School										
Technical/Other Training Schools										

Other Qualification/Training Skills

Job-related training courses (give title and year). Job-related skills (computer software/hardware, tools, machinery, typing speed, etc. Job-related certificates and licenses (current only). Job-related honors, awards, and special accomplishments (publications, memberships in professional/honor societies, leadership activities, public speaking, and performance awards.) Give dates, but do not send documents unless requested.

3. EMPLOYMENT RECORD

Please list all employment. Account for all times since leaving school, including periods of unemployment. (If you are fresh graduate leave this section)

Current/Last Employment (month & year)		Title of Position	Salary or Earnings	Start	Current
From	To		Base	_____	_____
			Supplemental		
Name and Address of Employer		Immediate Supervisor	Reason for Leaving/Changing the Employment		
		Name			
		Telephone			
		May We Contact? YES [] NO []			

Brief Description of Duties and Responsibilities

Previous Employment (month & year)		Title of Position	Salary or Earnings	Start	End
From	To		Base	_____	_____
			Supplemental		
Name and Address of Employer		Immediate Supervisor	May We Contact?		
		Name	YES [] NO []		
		Telephone			

Reason for Leaving/Changing the Employment

Brief Description of Duties and Responsibilities

4. REFERENCE

List three persons who are not related to you but who have definite knowledge of your capability to perform the duties of the position for which you are applying. Do not repeat the names of supervisors listed under "Employment Record."

Name	Address	Telephone	Title or Occupation

5. GENERAL

Have you ever been found guilty of an offense in a court of law in the Maldives or any other country? YES [] NO [] If yes, please give details

6. APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me or for firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

DATE SIGNED

SIGNATURE

Note

Certificates: Attach copies of your transcripts.

Interview: when you are call for interview you must bring all your original certificates and National ID card.

National ID: a copy of your National ID card is requested prior to employment. (both side)

OFFICIAL USE ONLY, INTERVIEW

Human Resource Management Section

Part A

Designation	Name
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About Applicant To be completed by Interviewer from HRMS

Are you living with your family? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you applied for any scholarship? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give details
Have you applied for any other Office? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give details	Are you married? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many children <input type="checkbox"/> M <input type="checkbox"/> F
	Any one from your family is doing business? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give details
Do you have a part time job? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, <input type="checkbox"/> Yes <input type="checkbox"/> No
Type of work	Place
Number of Hours Worked per Week	Income
Continue after joining MMA	
How would you rate your work (Circle) Fair Average Above Average	During which hours you are not available if you are required to do overtime
Comments	

Circle the number to scale this applicant 0 1 2 3 4 5 6 7 8 9
Poor Fair Good Excellent

Date

Signature

Head of Respective Section For the use of Interviewer from the Respective Section

Part B

Section (circle, if not listed below please write)

IT	ES	PPR	PDS	NBFIS	CMD5	CBSS	BS	CS	AS	RS	SS
Name										Designation	
Comments											

Circle the number to scale this applicant 0 1 2 3 4 5 6 7 8 9
Poor Fair Good Excellent

Date

Signature

Executives

Part C

Comments			
Name	Designation	Date	Signature