

**APPLICATION FORM FOR THE POST OF DRIVER**

**IN THE OFFICE OF THE PRESIDENT**

**Section A: (To be filled in by Applicant)**

1. SURNAME (*in block letters*):  
.....
2. OTHER NAMES (*in block letters*):  
.....  .....  .....  .....
3. Title: Mr.  Mrs.  Miss  (Tick as appropriate)
4. Date of Birth: ..... Age: .....
5. National Identity No.:  
.....
6. Residential Address (*In block letters*):  
.....  
.....  
.....
7. Phone No. Residence ..... Office  
..... Mobile  
.....
8. Present Post  
held:  
.....  
(whether temporary or substantive)  
.....
9. Date of appointment to present post:  
.....  
.....
10. Posting: (i) Ministry/Department  
.....  
(ii) Place of Work  
.....
11. Date joined service:  
.....
12. Date transferred to Permanent and Pensionable Establishment:  
.....  
.....
13. Date of 1<sup>st</sup>  
Appointment  
.....

14. Present salary (Basic)

.....

15. Previous Appointment held in Government Service and in what grade/capacity:-

Appointment	From	To	Ministry/Department

16. Educational Qualifications. Please enclose photocopies of Educational and Driving licence (Manual gear) to drive cars or vans or minibuses or lorries up to 5 tons.

.....

.....

17. Any other qualifications/experience relevant to the post applied for (Documentary evidence to be attached).

.....

.....

18. Have you ever (i) been subject to disciplinary action? (ii) been prosecuted before a court of law for any offence and subsequently found guilty during the last ten years? Answer Yes/No

If yes, indicate nature of offence and date of outcome.

.....

.....

Date: ..... Signature of Applicant:

**Section B (To be filled in by Head of Division/Section /Unit of Ministry/Department concerned)**

(i)

Year	Records of sick leave	Record of unauthorized absences
2021		
2022		
2023		
2024 (to date)		

(ii) Report on applicant:

Work:

.....

Conduct:

.....

Attendance:

.....

(iii) Comments, if any, on experience claimed and other remarks:

.....

Date: .....

.....

.....  
.....

(Signature of Officer)

Name (in full):

Designation:

---

**Section C (To be filled in by Human Resource Section of Ministry/Department where applicant is posted)**

(i) Whether employee has been subject to disciplinary action during the past ten years. If in the affirmative, please give details:

.....  
.....

(ii) I certify that particulars given by the Applicants in Section A have been verified and found correct.

Date:

.....



No.:

(Signature of Officer)

Name (in full):

Designation:

Contact