

# EMPLOYMENT APPLICATION FORM:

**INSTRUCTION:**

*This form is mandatory to be completed by all applicants applying for positions advertised in Relief International (RI) South Sudan program. This form can be collected by the applicant from any of Relief International' office in Juba and field offices from the department of Human Resources or downloaded from the website an advertisement is posted.*

*It should be fully completed and submitted to the points of application collection indicated in the advertisement or send through the email address indicated in the advertisement.*

*All fields in this form are mandatory and must be completed. Incompleteness of this form will lead to disqualification from the entire recruitment process.*

This form should be completed in **Block** (capital) letters or easy to read handwriting.

Submission of this form must be in hard copy, signed by the applicant or signed and scanned as PDF and send via email as indicated in the advertisement.

**NOTE:**

- *Competing this form does not mean you are successfully shortlisted and considered for interview or been selected for the position/job advertised.*
- *You do not need to attach your "Resume" or "CV" after completing this form.*
- *You need to submit your Motivation letter (cover letter) along with this form*
- *Attached all copies of your academic documents and national ID/Passport when submitting this form (**Do not submit original, RI will not be liable for any loss or damage**)*

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**1.1. PERSONAL INFORMATION:**

**Full Name:** \_\_\_\_\_  
(Given Name) (Sur Name)

**Home Address:** Boma: \_\_\_\_\_ Payam: \_\_\_\_\_ County \_\_\_\_\_

State: \_\_\_\_\_

**Current Address:** Residence \_\_\_\_\_ Block: \_\_\_\_\_ Street: \_\_\_\_\_

City/town: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ @ \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Mobile Telephone: \_\_\_\_\_

Date of Birth (Day/Month/Year) \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Nationality \_\_\_\_\_

National ID (Personal number) Or pass port No: \_\_\_\_\_ Gender: \_\_\_\_\_

**1.1. EMPLOYMENT DESIRED:**

Position you're applying for: \_\_\_\_\_  
(Only indicate position that has been advertised)

Vacancy reference number: \_\_\_\_\_

Date you can start working \_\_\_\_\_  
(Day/Month/Year):

Minimum Monthly Salary expected below which you will not accept an offer from RI (specific currency): \_\_\_\_\_

## 1.2. RELATIONSHIP WITH RELIEF INTERNATIONAL (RI) STAFF:

Do you know anyone who works for RI (both friends and relatives or spouse? **(Please select "yes" or "no")** Yes: \_\_\_\_ No: \_\_\_\_

If yes, who? \_\_\_\_\_  
(Given Name) (Sur Name)

What is your relationship to this person? (Tick) Spouse ☐ Sibling ☐ Friend ☐ Relative ☐

## 1.3. PREVIOUS EMPLOYMENT WITH RELIEF INTERNATIONAL (RI)

Have you ever worked for RI? **(Please select "yes" or "no")** Yes \_\_\_\_ No \_\_\_\_

If yes, provide dates of employment and ending job title and Location; **from:** \_\_\_\_\_ **To:** \_\_\_\_\_  
(Day/Month/Year) (Day/Month/Year)

**Location in South Sudan:** \_\_\_\_\_

**Job title:** \_\_\_\_\_

Starting salary before taxes: \_\_\_\_\_ Ending salary Rate before taxes: \_\_\_\_\_

Number and type of employees supervised by you; Number: \_\_\_\_\_ Type: \_\_\_\_\_ (support staff/Program staff)

Name of your Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number of your supervisor: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
( )

May we contact this supervisor? **(Please select "yes" or "no")** Yes \_\_\_\_ No \_\_\_\_

If No, what is the reason we should not contact your supervisor? :  
\_\_\_\_\_

Reason of leaving RI: End of contract due to funding **Tick** (\_\_\_\_) Voluntary resignation: **Tick** (\_\_\_\_) Terminated due to Disciplinary **Tick** (\_\_\_\_) Desertion of work place: **Tick** (\_\_\_\_)

If termination due to disciplinary; please explain: (Note that your records in files will be reviewed and any falsification will lead to disqualification from the entire recruitment process):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 1.4. EMPLOYMENT HISTORY-(Outside RI):

##### 1.4.1. INFORMATION ON CURRENT EMPLOYER (if currently employed):

Name of current Company (organization) / Employer:

(Mandatory)

Address: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
(Day/Month/Year) (Day/Month/Year)

Job Title: \_\_\_\_\_ Number of hours worked in a week \_\_\_\_\_

Starting salary before taxes: \_\_\_\_\_ Ending salary Rate before taxes: \_\_\_\_\_

Number and type of employees supervised by you; Number: \_\_\_\_\_ Type: \_\_\_\_\_ (support staff/Program staff)

Name of your Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number of your supervisor: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

May we contact this supervisor? *(Please select "yes" or "no")* Yes \_\_\_\_\_ No \_\_\_\_\_

If No, what is the reason RI should not contact your supervisor? \_\_\_\_\_

**Description of your Duties (attached a separate sheet if space is not enough) and clearly mark 1.5.1**

##### 1.4.2. INFORMATION ON PREVIOUS EMPLOYER:

###### A. FIRST EMPLOYER:

Name of previous Company (organization)/ Employer:

(Mandatory)

Address: \_\_\_\_\_

Start Date of employment: \_\_\_\_\_ End Date of employment: \_\_\_\_\_  
(Day/Month/Year) (Day/Month/Year)

Job Title: \_\_\_\_\_ Number of hours worked in a week \_\_\_\_\_

Starting salary before taxes: \_\_\_\_\_ Ending salary Rate before taxes: \_\_\_\_\_

Number and type of employees supervised by you; Number: \_\_\_\_\_ Type: \_\_\_\_\_ (support staff/Program staff)

Name of previous Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_  
(Mandatory)

Phone Number of previous supervisor: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

May we contact this supervisor? **(Please select "yes" or "no")** Yes \_\_\_\_\_ No \_\_\_\_\_

If No, what is the reason RI should not contact your supervisor? :

\_\_\_\_\_

**Description of your achievements (attached a separate sheet if space is not enough) and clearly mark 1.5.2.A**

**B. SECOND EMPLOYER:**

Name of previous Company (organization)/ Employer:

\_\_\_\_\_

*(Mandatory)*

Address: \_\_\_\_\_

Start Date of employment: \_\_\_\_\_ End Date of employment: \_\_\_\_\_

*(Day/Month/Year) (Day/Month/Year)*

Job Title: \_\_\_\_\_ Number of hours worked in a week \_\_\_\_\_

Starting salary before taxes: \_\_\_\_\_ Ending salary Rate before taxes: \_\_\_\_\_

Number and type of employees supervised by you; Number: \_\_\_\_\_ Type: \_\_\_\_\_ (support staff/Program staff)

Name of previous Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

May we contact this supervisor? **(Please select "yes" or "no")** Yes \_\_\_\_\_ No \_\_\_\_\_

If No, what is the reason RI should not contact your supervisor? \_\_\_\_\_

**Description of your Achievements (attached a separate sheet if space is not enough) and clearly mark 1.5.2.B**

### 1.5. EDUCATION HISTORY:

(Incomplete information could disqualify you from further consideration. You are required to attach copies ONLY of certificate and transcripts when submitting this form. RI may contact the administration of the collage/University you completed from. Give exact titles of degree, diploma in original language. Do not translate or equate to other degrees)

A: UNIVERSITY OR EQUIVALENT					
NAME & COUNTRY	ATTENDED FROM/TO		ACADEMIC DISTINCTION OBTAINED (Degree, Diploma, certificate)	MAIN COURSE OF STUDY	MAJOR
	Month/Year	Month/Year			

B: SCHOOL OR OTHER FORMAL TRAINING OR EDUCATION (high school, Technical schools or collages for short courses)					
NAME/PLACE/COUNTRY	ATTENDED FROM/TO		DEGREE and ACADEMIC DISTINCTION OBTAINED	MAIN COURSE OF STUDY	MAJOR
	Month/Year	Month/Year			

C: LIST ANY PROFESSIONAL SOCIATIES/ UNIONS AND ACTIVIRIES IN CIVIC AND PUBLIC OR INTERNATIONAL AFFAIRS					

D: LIST ANY SIGNIFICANT PUBLICATION YOU MIGHT HAVE WRITTEN (Do not attached)					

### 1.6. PROFESSIONAL REFERENCES:

(If you have been previously employed give the names of at least three (3) persons who have been your former supervisor. If you have not been employed before provide names of university/collage/school lecturer, supervisor during your internship. Additional references may be requested and /or contacted)

#### REFERENCE # 1

NAME: \_\_\_\_\_ YEARS ACQUAINTED: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ EMAIL: \_\_\_\_\_ @ \_\_\_\_\_

#### REFERENCE # 2

NAME: \_\_\_\_\_ YEARS ACQUAINTED: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ EMAIL: \_\_\_\_\_ @ \_\_\_\_\_

#### REFERENCE # 3

NAME: \_\_\_\_\_ YEARS ACQUAINTED: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ EMAIL: \_\_\_\_\_ @ \_\_\_\_\_

**ETHICAL AND BEHAVIORAL REFERENCES** –List three persons not related to you and are not current RI staff who are familiar with your character/behavior and qualification. Do not list names of supervisor you had listed in 1.3 above.

Full Name	Full address /telephone Number/ email	Occupation/Business

### 1.7. EMPLOYMENT WITH GOVERNMENT

Have you been a civil servant in the government? **(Please select “yes” or “no”)** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide dates of employment, ending job title and Location; from: \_\_\_\_\_ To: \_\_\_\_\_  
(Day/Month/Year) (Day/Month/Year)

Location in South Sudan: \_\_\_\_\_

Ministry you served in: \_\_\_\_\_ State; \_\_\_\_\_

Has your employment been terminated? *(Please select "yes" or "no")* Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, Reason for Leaving: \_\_\_\_\_

**1.8. CONVICTION AND LEGAL SUITS:**

Have you been arrested, indicted or summoned in to court as a defendant in a criminal proceedings or convicted, fined or imprisoned for the violation of any Law (excluding minor traffic violations) *(Please select "yes" or "no")* Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give full particulars of each case below

**(Attached a separate sheet if space is not enough) and clearly mark 1.9.**

**CERTIFICATIONS:**

I understand that neither the completion of this application form nor any other part of my consideration for employment establishes any obligation for Relief International (RI) to hire me. If I am hired, I understand that either Relief International (RI) - or I can terminate my employment in accordance with the terms and conditions as laid out in the employment contract and the employment policies and in accordance with relevant labor laws of the Republic of South Sudan and regulations.

I understand that no representative of Relief International (RI) has the authority to make any assurance to the contrary. I attest with my signature below that I have given to Relief International (RI) true and complete information on this application. No requested information has been concealed. I authorize Relief International (RI) to contact references and make any additional inquiries or investigations it deems necessary to establish the validity of the information provided during the course of the recruitment process.

If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate disqualification from the recruitment process and thereafter. I further understand that if successfully succeed in the recruitment process, I may be subject to future background investigations in accordance with my employer's obligations to its funders and/or legal requirements. Refusal to permit a background investigation or failure to successfully pass such an investigation may jeopardize my continued employment and may result in my dismissal.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_