**CENTRAL WATER AUTHORITY**

HEAD OFFICE: St Paul, Phoenix

Telephone: 601 5000, Fax (230) 6866264

Email Address: [cwa@cwa.mu](mailto:cwa@cwa.mu)

**APPLICATION FOR EMPLOYMENT**

For Office Use Only

Remarks:

**(EXTERNAL)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **POST APPLIED FOR:-** | | | | | | |
| SURNAME: | | | TITLE: Mr/Mrs/Ms  *(Tick as appropriate)* | | | Do you hold a full valid driving licence? YES/NO |
| OTHER NAMES: | | | | | | |
| MARITAL STATUS: | | | DATE OF BIRTH: | | |  |
| MAIDEN NAME: | | | | | |  |
| ADDRESS:  Tel No (Home):  Mobile No:  email Address: | | | | TEMPORARY ADDRESS FOR  COMMUNICATION: (if applicable)  Tel No: | | |
| **EDUCATION AND QUALIFICATION** | | | | | | |
| **DATES** | | **SCHOOL** | | | **QUALIFICATON AND GRADES OBTAINED** | |
| From | To |  | | |  | |
|  |  |  | | |  | |
|  |  |  | | |  | |
|  |  |  | | |  | |

**EMPLOYMENT HISTORY**

**POSTS HELD AND EXPERIENCE**

Give details of posts held, names and addresses of employers and particulars of your employment.

|  |  |  |  |
| --- | --- | --- | --- |
| **DATES** | | **EMPLOYERS NAME AND ADDRESS,**  **NATURE OF BUSINESS** | **WAGES**  **SALARY/GRADE** |
| From | To |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Signature of applicant: ……………………………………………………… Date: …………………………………..**

***Note: Candidates are requested to enclose a copy of their Educational Certificate, National Identity Card, Birth Certificate,work evidence and driving license (if any)***