**CENTRAL WATER AUTHORITY**

 HEAD OFFICE: St Paul, Phoenix

 Telephone: 601 5000, Fax (230) 6866264

 Email Address: 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)***