



Regional Centre on Groundwater Resources Education, Training & Research in Eastern Africa
P.O. BOX 41156-00100, Bishop Rd, NSSF Building Block A 16th Floor Western-Wing
Website: www.rcgw.go.ke , Email: info@rcgw.go.ke ,
Telephone: +254208008004

RCGW APPLICATION FOR EMPLOYMENT FORM

Please complete all sections of this form in BLOCK letters and submit to:

The Board Chairperson
Regional Centre on Groundwater Resources Education, Training & Research in Eastern Africa
P.O. BOX 41156-00100, Nairobi, Kenya

Or email: **chairman@rcgw.go.ke**

1. VACANCY APPLIED FOR

Vacancy/Post:

Vacancy Ref. No:

2. PERSONAL DETAILS FOR THE APPLICANT

Name (Surname, First, Other Names):

Title (Prof/Dr/Mr./Mrs./Miss/Ms./Rev):

Date of Birth (dd-mm-yyyy):**National ID/Passport No:**

KRA PIN No:

Gender: ☐ Male ☐ Female

Nationality:**Ethnicity:**

County:**Sub-County:**

Constituency:

Postal Address:**Postal Code:**

Town/City:

Telephone No:**Mobile No:**

Email Address:

Alternative Contact Person:

Alternative Contact Telephone No:

Disability Status: ☐ Yes ☐ No

If Yes, specify nature of disability and provide National Council for Persons with Disabilities Registration No.

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3. APPLICANTS IN PUBLIC SERVICE ONLY

Ministry/State Department/County/Other Institution:

Station:

Personal/Employment No:

Present Substantive Post:

Job Group/Grade:

Date of Current Appointment:

Upgraded Post (if applicable):

Effective Date of Previous Appointment:

On Secondment (if applicable): Organization, Designation, Job Group/Grade:

Terms of Service: ☐ Permanent & Pensionable ☐ Contract ☐ Other (specify):

4. ALL OTHER APPLICANTS

Current Employer:

Position Held:

Effective Date:

Gross Monthly Salary (Ksh):

5. OTHER PERSONAL DETAILS

Have you ever been convicted of a criminal offence or subject to probation order? ☐ Yes ☐ No

If **Yes**, state nature of offence, year, and duration:

Have you ever been dismissed or removed from employment? ☐ Yes ☐ No

If **Yes**, state reason(s) and effective date:

6. ACADEMIC QUALIFICATIONS (STARTING WITH HIGHEST)

Year (From– To)	Institution	Award/Attainment	Course/Programme	Specialization	Class/Grade

7. PROFESSIONAL/TECHNICAL QUALIFICATIONS

Year (From–To)	Institution	Award/Attainment	Specialization	Class/Grade

8. COURSES & TRAINING

Year	Institution	Course Name	Duration/Details

9. PROFESSIONAL MEMBERSHIPS

S/No	Professional Body	Membership/Reg. No.	Membership Type	Date of Renewal

10. EMPLOYMENT HISTORY (STARTING WITH CURRENT)

S/No	Year (From–To)	Position	Job Group/Grade	Gross Monthly Salary	Employer/Institution
1.					
2.					
3.					

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This image shows a full page of white paper with horizontal dotted lines, typical of primary school writing paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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13. REFEREES (PEOPLE WHO HAVE INTERACTED WITH YOU PROFESSIONALLY) TWO SEPARATE TABLES FOR REFEREE 1 AND REFEREE 2 (NAME, OCCUPATION, ADDRESS, MOBILE, EMAIL, PERIOD KNOWN).

Full Name:

Occupation:

Address:

Mobile No:

Email:

Period Known:

Full Name:

Occupation:

Address:

Mobile No:

Email:

Period Known:

Full Name:

Occupation:

Address:

Mobile No:

Email:

Period Known:

14. DECLARATION

I certify that the particulars given on this form are correct and understand that any incorrect/misleading information may lead to disqualification and/or legal action.

Date: _____ **Signature of Applicant:** _____