Specimen Form of Application

Recruitment to the Post of Principal Public Health Inspector of the Ministry of Health.

Part-01: To be filled by the relevant officer himself. 1. a) Name with Initials: b) Name in Full: c) National Identity Card No.: d) Date of Birth: Age as at the closing date of applications:-Years......Months.......Days...... 2. Institution/Hospital where the officer is serving: 3. Official Address: a) Official Telephone No: b) Private Address: c) Personal Telephone No: d) Date of first appointment: 4. a) Date of confirmation in the appointment: b) Date of promotion to Segment II "A": c) Date of promotion to Grade I: d) Date of completion of Efficiency Bar Examination for Grade I:-.... e) Date of promotion to Supra Grade:-.... f) (Attach certified copies of the above documents) Whether the candidate possess the Certificate of Royal Society of Health/Diploma 5. a) Certificate of the National Institute of Health Sciences:.... Particulars of special qualifications, if any:..... b)

6.	During the period of service from the date of promotion to Grade I until the date you			
		he eligible, have all salary increments been earned by the	due date?	
	a)	if not, give reasons, and mention the period		
	b)			
		been deferred:		
	c)	Should attach certified copies of the certificate		
		of promotion to Grade I up to the date you bec		
	d)	Should attach certified copies of performance		
		If performance reports are not included in the	personal file, reasons must be	
		provided in writing.		
7.	Particulars of leave obtained by the officer during the service period from the date of			
	promotion to Grade I up to the date you become eligible, period of leave on no-pay/half			
	pay/ other, if obtained:			
	(Leave particulars confirmed by the Head of the Institution should be attached)			
	(Dear	e particulars comminde by the freeze of the most	,	
8. a) Have you been subjected to any disciplinary inquiry or disciplinary punishment during the period from the date of promotion to Grade I up to the closing date of applications:				
	b) Particulars, if any: -			
	••••			
contai	ned her	hat the above particulars are true and correct. I rein are found to be false or incorrect before s and after offer appointment I am liable to be din.	election I am liable to be disqualified	
****	 I	Date S	Signature of the Applicant	

Part-02: Recommendation of the i	mmediate Supervising Officer: -
	who is serving in the post of Public Health Inspector under quired qualifications, I recommend him to be appointed to the ector of the Ministry of Health.
Date	Signature and Official Stamp of the Officer in Special Grade / Head of the Branch
the officer concerned.	r-in charge of the subject according to the personal file of culars furnished from 01-08 in the application are correct officer concerned.
Date	Signature of the officer-in charge of the subject
Part-04: Recommendation of the	Administrative Officer
I certify that all the particulars furni correct, I do recommend the applica	shed from 01-08 in the application of the officer concerned are tion.
Date	Signature of the Administrative Officer
Part-05: Recommendation of the l	Head of Institution
the Post of Public Health Inspector, Post of Public Health Inspector from and satisfactory service period of 0	ned above of Mr
Date	Signature and Official Stamp of the Head of Institution