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|  **UGANDA NATIONAL OIL COMPANY LIMITED (UNOC)****JOB APPLICATION FORM****REF. No. .............................................. (*for official use by UNOC*)** |
| **INSTRUCTIONS**Please answer each section clearly and completely.This Application Form must be electronically completed, printed and signed.Applicants MUST also submit a signed personal statement (max 2 pages of A4)Attach certified academic documents as evidence of Education and Training Provide any other relevant evidence to support your applicationAll documents MUST be submitted in TRIPLICATE. |
| **POSITION APPLIED FOR:** |

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| 1. First Name: Middle Name: Surname: Family Name:

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| 1. Date D/ M/ Y

 of Birth:  | 1. Place of birth:
 | 1. Nationality:
 | 1. Gender
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| 6.Marital status:Single [ ]  Married [ ]  Separated [ ]  Widow(er) [ ]  Divorced [ ]  |

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| 7. Permanent address:   | 8. Present address (if different*)*  | 9. Telephone/Cell phone No/Email address:  |

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| 10. **HAVE YOU ANY DEPENDENTS?**YES [ ]  NO [ ]  If the answer is "yes", give the following information: |

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| **NAME** | Date of Birth | Relationship | **NAME** | Date of Birth | Relationship |
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|  **11**. **LANGUAGES** |

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|  | **READ** | **WRITE** | **SPEAK** | **UNDERSTAND** |
| **LANGUAGE** | Easily | Not Easily | Easily | Not Easily | Easily | Not Easily | Easily | Not Easily |
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| **12.** **EDUCATION. Give full details - *N.B.*** *Please give exact titles of degrees in original language.* *If there is need to obtain a translation, ensure it is undertaken and certified by the National Council for Higher Education.***A. INSTITUTION** |
| NAME, PLACE AND COUNTRY | ATTENDED FROM/TO | ACADEMIC QUALIFICATIONSOBTAINED | MAIN COURSE OF STUDY |
| *M./Y* | *M/Y* |
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| **B. OTHER PROFESSIONAL TRAININGS**  |
| NAME, PLACE AND COUNTRY | TYPE | ATTENDED FROM/TO | CERTIFICATES OR DIPLOMAS OBTAINED |
| *M/Y* | *M/Y* |
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| **13. MEMBERSHIP** **IN SOCIETIES, ASSOCIATIONS AND CLUBS**  |
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| **14.** **EMPLOYMENT RECORD:** *Starting with your most recent post. Give both gross and net salaries per annum for your last or present post.***A. POSITION 1**  |

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| FROM | TO | SALARIES PER ANNUM |  TITLE OF YOUR POST: |
|  |  |   |  |
| NAME OF EMPLOYER:  | TYPE OF BUSINESS:  |
| ADDRESS OF EMPLOYER:  | NAME OF SUPERVISOR: |
| NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU: | REASON FOR LEAVING: |
| DESCRIPTION OF YOUR DUTIES AND ANY ACHIEVEMENTS (not more than 500 words) |
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 **B. POSITION 2**

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| FROM | TO | SALARIES PER ANNUM | TITLE OF YOUR POST: |
| MONTH/YEAR | MONTH/YEAR | STARTING | FINAL |
| NAME OF EMPLOYER:  | TYPE OF BUSINESS:  |
| ADDRESS OF EMPLOYER: | NAME OF SUPERVISOR:  |
| NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU: | REASON FOR LEAVING: |
| DESCRIPTION OF YOUR DUTIES AND ANY ACHIEVEMENTS (not more than 500 words) |
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**C. POSITION 3**

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| FROM | TO | SALARIES PER ANNUM | TITLE OF YOUR POST: |
| MONTH/YEAR | MONTH/YEAR | STARTING | FINAL |
| NAME OF EMPLOYER:  | TYPE OF BUSINESS:  |
| ADDRESS OF EMPLOYER: | NAME OF SUPERVISOR:  |
| NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU: | REASON FOR LEAVING: |
| DESCRIPTION OF YOUR DUTIES AND ANY ACHIEVEMENTS (not more than 500 words) |
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**D. POSITION 4**

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| FROM | TO | SALARIES PER ANNUM | TITLE OF YOUR POST: |
| MONTH/YEAR | MONTH/YEAR | STARTING | FINAL |
| NAME OF EMPLOYER:  | TYPE OF BUSINESS:  |
| ADDRESS OF EMPLOYER: | NAME OF SUPERVISOR:  |
| NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU: | REASON FOR LEAVING: |
| DESCRIPTION OF YOUR DUTIES AND ANY ACHIEVEMENTS (not more than 500 words) |
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| **15. REFERENCES:** List three persons, not related to you, who are familiar with your character and qualifications. *Do not repeat names of supervisors provided above* |
| **FULL NAME** | **FULL ADDRESS INCLUDING TELEPHONE AND EMAIL CONTACTS.** | **BUSINESS OR OCCUPATION** |
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| 1. Any other relevant information you would like to add **(Not more than 500 words)**:

 17. HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINALPROCEEDING, OR CONVICTED, FINED OR IMPRISONED FOR THE VIOLATION OF ANY LAW (exclude minor traffic violations)?YES [ ]  NO [ ]  If "yes", give full of each case in an attached statement. |
| 18. I certify that the information I have provided is true, complete and correct to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on this form or other document requested for renders a staff member of the UNOC liable to summary termination or dismissal.**DATE: SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
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