



Job Application Form

Form 2

Form must be completed by Applicant

Section 1: Position Details

Ministry MAF	Section CSD	Location MAIN OFFICE-SOGI	
Position Code AG003486	Title Accountant	Supervisor Position Code AG003429	
		Salary Grade A10	Salary Rate \$27,559

Section 2: Personal Details

First Name:	Last Name:	Other Names:
Gender:	Date of Birth:	NPF No:
Marital Status:	Physical Address (1):	Physical Address (2):
Post Code:	Phone No (1):	Phone No (2):
e-Mail:	Facsimile:	

Section 3: Education Details

Most recent qualification	Major Area of Study	Institution Attended	Date Started	Year Graduated

Section 4: Training History

Courses Relevant to Selection Criteria ONLY	Institution/Country	Dates

Section 5: Employment History

Current / Most recent Position

Employer's Name	Date	Duration
Position Title	Number of Staff:	
Main Responsibilities		

Next previous position

Employer's Name	Date	Duration
Position Title	Number of Staff:	
Main Responsibilities		

Next previous position

Employer's Name	Date	Duration
Position Title	Number of Staff :	
Main Responsibilities		

Next previous position

Employer's Name	Date	Duration
Position Title	Number of Staff:	
Main Responsibilities		

Section 6: Selection Criteria

Based on an analysis of the duties of this position as determined by the Manger responsible, set out below are the criteria that will be used in assessing the suitability of each Applicant for the position. Please address each selection criteria on a separate sheet and attach to this form.

It is the Applicant's responsibility to:

1. Indicate aspects of their work experience which indicate their ability to satisfy each Merit Factor in executing the duties specified in the Job Description.
2. Complete this information in a true and accurate way (failure to do so will disqualify the Applicant); and
3. Supply supporting documentation should they be called for short-listed interviews.

Note: If you feel the need to supply additional arguments to support your fulfilment of the selection criteria listed below then please attach that information to this application form.

MERIT FACTORS :
1. Skills and Abilities (refer to JD for full details)
1.1 Communication and Presentation Skills 1.2 Building Relationships 1.3 Management (Self/work)
2. Personal Attributes (refer to JD for full details)
2.1 Values and Ethics 2.2 Commitment and Personal Drive 2.3 Integrity

3.1 Experience (refer to JD for full details)**3.2 Pas Work Performance**

- 3.1.1 Must have 2 or more years of relevant working experience preferably commerce field within the public service or private sector
 3.2.1 Must be able to analyse and interpret financial information and prepare reconciliations and reports
 3.2.2 Must have background knowledge with any accounting system preferably Finance One System

5. Qualification (refer to JD for full details)

- 2.1 Minimum Qualification of a Bachelor's Degree in Accounting or Commerce or any relevant discipline.

Section 7: Computer Skills and Competency

Indicate competency level for each Application

Competency Level code: 1= no knowledge; 2= basic knowledge; 3= good knowledge; 4= strong/advanced capabilities

Main Applications	Competency level:	Other Systems	Competency level:
Ms Word		Ms Access	
Ms Excel		Other (specify)	
Ms Powerpoint		Other (specify)	
E-mail		Other (specify)	

Section 8: Knowledge of Languages

For languages other than your mother tongue, enter appropriate number from code below to indicate level of your language skills	Indicate your mother tongue by ticking a box below			Speak	Read	Write
	Samoan	English	Other (specify)			
CODE 1. Limited conversation, reading of newspapers, routine correspondence						
2. Engage freely in discussions, read write more difficult materi						
3. Speak, read and write (nearly) as well as mother tongue.						

Section 9: Discipline Records Check

Do you have a discipline record; any criminal convictions; or any current legal proceedings against you? (Please TICK the appropriate box)

No

Yes

IF Yes, Please provide details on a separate piece of paper in a sealed envelope and attach it to this form. This information will be kept confidential and only be seen by the Assessment Committee.

Section 10: Declaration of Referees

Please note that you need to declare addresses and contact numbers of three referees.

Referee Name	Designation	Address/Contact Numbers
1.		
2.		
3.		

Section 11: Declaration of Close Relations

Do you have a close relation (family ties) to an individual(s) currently employed anywhere in the Ministry to which you are applying? (Please TICK the appropriate box)

No

Yes

If YES, please provide name(s) of your relation(s) and state nature of relationship

Section 12: Community Status

Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list:

Section 13: Certification And Authorisation

I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.

Signature	Date
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