



LAUTOKA CITY COUNCIL

T. + 679 666 0433
E. info@lautokacitycouncil.com.fj

169 Vitogo Parade, Lautoka.
PO Box 124 Lautoka.

1. Personal Details

Position Applied For		Paste your recent color passport size photograph
Full Name		
Date of Birth		
Gender		
Postal Address		
Residential Address		
Mobile No		
Home Phone No		
E-mail Address		

2. General Details

Marital Status	
No. of Dependents	
Nationality	
Language Spoken	
Interest/Hobbies	
FNPF No	
Driver License No	

3. Medical & Police Details

Question	Yes / No	Please specify if Yes
Do you have any medical conditions?		
Have you ever been convicted fined or imprisoned for the violation of any law?		

4. Software Skill *(Write all software name that you can do)*

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5. Education *(Attach certified copies of all academic qualifications)*

A. Tertiary

Qualification	Status (Completed/Pursuing)	Tertiary Institution/Year



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B. Secondary School

Qualification	Certificate Obtained	Passed	Marks

C. Professional Development Short Courses/workshops (Local/Overseas) attended that is RELEVANT to the advertised position

Name of Course/Training/Workshop	Tertiary Institution / Location	Dates Attended

6. Work Experience

A. Current Work Experience

Company	
In Employment since	
Post Title	
Current Salary	
Department	
Position you report to	
If in a supervisory position, how many staff report to you?	
Notice period required for leaving the present job	

B. Previous Work Experience

Organization/Company	Position held	Period	Reason for Leaving

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7. Industrial Attachment Experience *(If applicable to position advertised)*

Organization/Company	Department	Period

8. Professional Membership – relevant to the advertised position

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9. Referees

Name	Current Position/Company	Phone Contact/E-mail Address

10. Any other Information *(Please state any other information in support of your application)*

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11. Declaration

I certify that the statements made by me in this form are true and correct to my understanding. I understand that any misrepresentation or omission of information made on this form may lead to disqualification of my application.

Name

Signature

Date