

Republic of the Marshall Islands Public School System P.O. Box 3

Majuro, Marshall Islands 96960

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APPLICATION FOR EMPLOYMENT

This form shall be used for all applications for appointment to or within the Marshalls Islands Public School System. TYPE or PRINT all answers clearly with a dark ball point pen. Answer all questions fully and accurately.

1. POST APPLIED FOR:

1. POST APPLIED FOR	i .						
Ministry/Agency:				Employment Announcement No:			
Job Title:			Pay Level:		Salary:		
2. PERSONAL DETAILS	S:						
First Name	Last Name	MI			Social Security No.:		
Home Address:	ı				Phone No.:		
City:	Country/State:	Zip Code:			Cell No.:		
Correspondence Address:					Email Address:		
City:	Country/State:		Zip Code:				
DI CD: II					Date of Birth:		
Place of Birth:							
Sex:		Marita	l Status:	Marr	ried [] Single []		
Male []				Widow	ved [] Divorced []		
Female []			Separated []				
itizen of Marshalls: Yes []			Children's Ages:				
ĺ	No []						
If, NO, Nationality:							
Next of Kin Name:			Relationship:				
Address: City:			: Coun		ry/State: Zip Code:		
3. REFERENCES:							
First Name	Last Name		Phone No.:		Email Address:		

Course Title		From	То	Location	
5. FORMAL EDUCATIO	N (<i>List in D</i>	ate Order):			
High School Attended		From	То	Highest Grade Completed/Diplor	
College or University Attended		From	То	Major	Degree/Number C
6. DETAILS OF EMPLOY	MENT:				
Employer	From	То	Job Title	Salary	Reason for Leavi
7. DETAILS OF HOBBIES	S, SPORTS	OR SPECIAL INT	ERESTS:	SPECIAL SKIL	LS:
ertify that all of the answers st of my knowledge and bel				rue, complete a	nd correct to the
gnature of Applicant					