

Job Application Form

Form 2

Form must be completed by Applicant

Section	1: Positio	n Details

Ministry	Section	Location	Location	
MESC	NARA	MAIN OFFICE	MAIN OFFICE	
Position Code	Title	Supervisor Positio	Supervisor Position Code	
EC000087	Principal Acrhives Officer	EC001096	EC001096	
		Salary Grade Salary Rate		
		A16	\$53,517/\$62,624	

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
Current /	IVIUSI	recent	PUSILIUII

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 reponsibility 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)

Strategic Thinking

Building and sustaining relationships

Delivers/Achieves results outcomes

Leaderships

2. Personal Attributes (refer to JD for full details)

Commitment and Personal Drive

ntegrity

Intellect and Judgement

Principal Acrhives Officer - EC000087

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

A minimum (5) five years experience in Archives and Records Management

Experience in developing policies and procedures manuals

Experience In staff training

5. Qualification (refer to JD for full details)

Must have minimum qualification of Bachelors in Archives, Records, Information Management or equivalent

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

,	Indicate your mother by ticking a box below	_	Speak	Read	Write
CODE	Samoan				
1. Limited conversation, reading of newspapers, routine	English				
correspondence 2. Engage freely in discussions, read write more difficult material.	Other (specify)				
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	No	Yes
proceedings against you? (Please TICK the appropriate box)		

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 inidvidual(s) currently employed anywhere	No	Yes
in the Ministry to which you are applying? (Please TICK the appropriate box)		

Due Date:	(refer to PSOC)	Principal Acrhives	Officer - EC000087	Form 2
If YES, please prov	vide name(s) of your relation(s) and s	state nature of relationship		
Section 12: 0	Community Status			
Outside the work if so, please list:	environment, do you hold any posit	ons (including matai titles) associat	ted with community serv	ices, and
I hereby certify th on the basis of an	Certification And Authoris at the information given in my appli y false information that I provide my cessary checks to confirm the inform	cation is true and correct. I also ack appointment will be revoked. I also	•	•
Signature			Date	