

STAFF APPLICATION FORM

- Please complete the form clearly in black ink or typescript.
- Please attach certified copies of certificates supporting your application. Originals will need to be sighted prior to an unconditional offer of employment.
- Should you require additional space to address any question, please attach additional pages.
- You are invited to submit a separate curriculum vitae if you wish.
- Please **send completed application form to**: The Principal, Fulton Adventist University College, Private Mail Bag, Nadi Airport, Fiji; Email: principal@fulton.ac.fj.

1. 10	SITION AT	TON.				
2. PE	RSONAL DI	ETAILS				
Surname:			Previous Surname:			
First Name:						
Title:			Any other previous name changes:			
Home Addr	ess:					
Email:						
Telephone:			Mobile:			
Citizenship	:					
3. ED	UCATION &	& QUALIFICATIONS				
Please give	details of all	your Higher Education	and equivalent courses:			
Prom (mm/yy)	To (mm/yy)	Name of University/ Other Institution	Qualification obtained and Grade/Level	Name of Awarding Body		

Please give to your app		y other professional or voc	ational qualifications yo	u hold that are	e relevant
Dates obtained		Qualification and G	Name of Awarding Body		
5. CU	RRENT EM	IPLOYMENT			
Please give to your app		y other professional or voc	ational qualifications yo	u hold that are	e relevant
Emp	oloyer	Job Title	Role	From To (mm/yy)	
Current Sal	ary:				
Reason for	Leaving:				
6. EM	To	T EXPERIENCE			
(mm/yy)	(mm/yy)	Employer	Job Title	Re	ole
Reason for	Leaving:				
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Reason for	Leaving:				
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Reason for	Leaving:				
7. PE	RIODS NOT	IN EMPLOYMENT OF	R EDUCATION		
From (mm/yy)	To (mm/yy)	Reason for Periods not in Employment/Education			

LIST ANY OTHER RELEVANT TRAINING UNDERTAKEN

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Please provide details of two referees, who have had recent professional knowledge of your work, one of which must be your present employer, or last employer if not currently employed. References will not be accepted from relatives or people writing solely in the capacity of friends. It is Fulton Adventist University College's policy to request references prior to interview. If you have any concerns about this, please contact us.

Present Employer	
Name:	
Position:	
Address:	
Email:	
Telephone:	Fax:
Other Referee:	
Name:	
Position:	
Address:	
Email:	
Telephone:	Fax:
9. SUPPLEMENTARY INFORMATION Within this supplementary information, please incl	
9. SUPPLEMENTARY INFORMATION Within this supplementary information, please incl you believe are relevant to your suitability for the	ude a statement of personal qualities and experience
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11	. DECLARATION
	re you related to or do you have a close relationship with a member(s) of the Fulton Adventist niversity College Administration or Fulton Adventist University College Board? Yes/No
If	Yes, please provide details.
Id	leclare that:
•	the information I have given on this form is complete and accurate
•	I am not banned or disqualified from working with children nor subject to sanctions or conditions on my employment imposed by a regulatory body
•	I understand that to knowingly give false information, or to omit information, could result in the withdrawal of any offer of employment, or my dismissal at any time in the future, and possible criminal prosecution.

Date:

FOR PERSONS WHO ARE NOT FIJIAN NATIONALS

If you have any conditions related to your employment, please give full details below.

10.

Signature: