

CENTRAL BANK OF SOLOMON ISLANDS RECRUITMENT APPLICATION FORM

POSITION DETAILS								
VACANCY REFERENCE NO.	02/2018							
POSITION TITLE:	Analyst Financial Inclusion							
DEPARTMENT:	Governor's Office							
UNIT:	Financial Inclusion Unit							
GRADE:	3.2							
BASE SALARY RANGE:	SBD\$72,509.00 - \$104,649.00 per annum.							
INSTRUCTIONS: This application form is to be completed by all interested candidates for this position. It is expected that you provide all precise and necessary details required in this form. Failure to fully complete this form can disqualify your application from further consideration.								
PERSONAL DETAILS								
MR/MRS/MS/MISS								
FIRST NAME:								
MIDDLE NAME:								
SURNAME:								
GENDER:								
DATE OF BIRTH:								
HOME VILLAGE & PROVINCE:								
RELIGION:								
MARITAL STATUS:	T			T = - =				
NAMES OF LEGAL	NAMES		RELATIONSHIP	DATE OF BIRTH	AGE			
DEPENDENTS:								
CONTACT DETAILS								
CONTACT DETAILS								
CURRENT POSTAL ADDRESS:								
CURRENT RESIDENTIAL ADDRESS:								
EMAIL ADDRESS:								
TELEPHONE CONTACT:	WORK:							
	HOME:							
	MOBILE:							

OTHER INFORMATION										
HIGHEST QUALIFICATION: (Please tick)	QUALIFICATIO	N FIELD	YEAR ATTAINED	INSTITUTION		N				
	PhD									
	Masters									
	Bachelors									
	Diplomas									
	Certificates									
	Others									
DETAILS OF OTHER										
QUALIFICATIONS:										
CURRENT EMPLOYMENT:	YES									
	NO									
IF ANSWER TO ABOVE IS NO										
THEN EXPLAIN WHAT YOU										
ARE CURRENTLY DOING.										
CURRENT EMPLOYER:										
PERIOD OF EMPLOYMENT:										
CURRENT POSITION TITLE:										
CURRENT GRADE/LEVEL:										
CURRENT BASE SALARY:										
REASON FOR APPLICATION:										
APPLICATION CHECKLIST DETAILS						TICK				
Please check that the following documents are attached to this application form.						No				
1. A cover letter										
2. Resume or Curriculum Vitae	!									
3. Two copies of reference letters										
4. Certified copies of academic qualifications and transcripts.										
Any other Comments:										
I certify that the information provided above is true to the best of my knowledge. I also										
understand that I will only be contacted if my application is short-listed for further consideration.										
Signature:		Date:								
(Type name if submitting electronical	ly)									