

# APPLICATION FORM



RESIDENTIAL SURVEY ENUMERATOR	
Position applied for	ENUMERATOR
Date	

SECTION A: PERSONAL	
Name:	
ID card no:	
Date of Birth:	
Permanent Address:	
Correspondence Address:	
Mobile no:	
E-mail address:	
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed

SECTION B: EDUCATION	
Please tick the highest level completed	
Education:	<input type="checkbox"/> O'Level <input type="checkbox"/> A'Level <input type="checkbox"/> Cert. <input type="checkbox"/> Diploma <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters

SECTION C: APPLICANT'S DECLARATION	
As an applicant, I hereby declare that the information provided on this application form and supporting documents is true and complete to the best of my knowledge and belief. I understand and agree that failure to answer all questions on this application form and/or providing false information herein may be cause for denial of employment or dismissal in the event of employment.	
Applicant Signature	Date

**ATTACHMENTS:** (Please submit CV and ID card copy with this application)  CV  ID card copy