



The National Roads Authority
of the Cayman Islands

www.caymanroads.com

CONFIDENTIAL EMPLOYMENT APPLICATION

Post Applied for:

Official Use Only:

Job Reference#:

Closing Date (DD/MM/YYYY):

Application Received:

Date Notified of Outcome:

This form must be completed fully using black ink or type. Attach additional pages if needed. Incomplete application forms or applications received after the closing date will not be considered. You may attach a C.V or Resume in support of your application.

1. Personal Information

First Name:

Last Name:

Middle Name(s):

Other Names(s); ie, Nicknames:

Date of Birth (DD/MM/YYYY)

Mailing Address:

Street Address:

Telephone Contact Numbers: Home:

Mobile:

Work:

May we contact you at work? Yes No

Driver's License#

Group#

Email:

What is your Nationality?

If you are not a Caymanian, what is your Immigration status in the Cayman Islands?

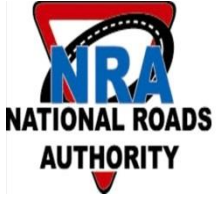
Holder of Residency and Employment Rights Certificate

Work Permit Holder

Work Permit Expires (dd/mm/yyyy)

Other (Please specify below)

If you are successful in your application, evidence of your Immigration Status will be required prior to appointment.



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2. Education

Note: Please list qualifications or training obtained which support your application. For technical, professional or management qualifications, please provide course details. Please list highest qualification first.

College or University	Course	Qualifications and grades obtained

School	Subjects	Qualifications and grades obtained

Professional/ Technical / Management Qualifications Please give details:	Course Details

Current Membership in any Professional/ Technical Associations – Please state level of Membership:

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Continue on a separate sheet if necessary



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3. Training & Development

(Any training & development courses or non-qualification courses which support your application.)

Title of Training Programme of Course	Length of Course	Area(s) Focus

4. Present Employer

(If you are currently unemployed, please give details of most recent employer)

Name of Employer:

Address:

Post title:

Summary of Duties:

Date of Appointment (DD/MM/YYYY):

Notice Period Required:

Last Day of Service (DD/MM/YYYY):

(if no longer employed)

Reason for Leaving:

(if no longer employed)

Continue on a separate sheet if necessary



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5. Previous Employment

Please list employers of the past 8-10 years, with most recent employer first:

i. Name of Employer:

Address:

Position Held:

Period of Employment (MM/YYYY):

to (MM/YYYY):

Summary of Duties:

Reason of Leaving:

ii. Name of Employer:

Address:

Position Held:

Period of Employment (MM/YYYY):

to (MM/YYYY):

Summary of Duties:

Reason for leaving:

iii. Name of Employer:

Address:

Position Held:

Period of Employment (MM/YYYY):

to (MM/YYYY):

Summary of Duties:

Reason for Leaving:

Continue on a separate sheet if necessary



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6. Personal Statement

(Please explain why you are applying and how you meet the requirements set out in the job description.)

7. Convictions & Conditions

Have you ever been convicted of a criminal offence in any country?*

Yes

No

If so, which country/ countries?

Have you been dismissed, discharged or suspended from employment?

Yes

No

*If Yes, please submit full details of the conviction, employment incident or condition within a sealed envelope attached to this application form. Mark the envelope 'Confidential' for the attention of the Head of HR & Administration who will open it if you are selected for interview. A conviction, previous employment incident or travel issues will not necessarily disqualify an applicant.

Continue on a separate sheet if necessary



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8. References

Please give details of two individuals (non-relatives) who may be contacted for work-related references. If you have not been employed, provide an academic and character reference. NB: It is important to tick the relevant boxes below.

If self-employed, please indicate your business name: _____ and supply business references.

Reference 1

Name: _____ Position/Job Title: _____

Working Relationship _____ Organisation: _____

Address: _____

Telephone: _____ Email: _____

This referee may be contacted: At any stage during the recruitment Only if shortlisted Only if I am a preferred candidate

Reference 2

Name: _____ Position/Job Title: _____

Working Relationship _____ Organisation: _____

Address: _____

Telephone: _____ Email: _____

This referee may be contacted: At any stage during the recruitment Only if shortlisted Only if I am a preferred candidate

Please complete and sign the following declaration.

If you are returning this form by email to recruitment@nra.ky please ensure that the scanned document includes your signature.

I hereby certify that the information provided on this form is fully accurate to the best of my knowledge, and I authorize representatives of the National Roads Authority of the Cayman Islands to collect and/or verify any information that is relevant in support of my application. I understand and agree that false particulars or suppression of material facts will render me liable to disqualification and, if appointed, to dismissal and/ or appropriate legal proceedings.

I understand and agree that, if offered employment, I will be required to provide proof of my qualifications and a police clearance certificate from my country of residence as well as undergo a pre-employment medical examination to ascertain my health status. Adverse results of such examinations which affect job performance may result in the withdrawal of the offer of employment.

Signed: _____

Date (DD/MM/YYYY): _____