(I) READ CAREFULLY THE NOTES AND INSTRUCTIONS BEFORE FILLING THIS FORM.

(II) KINDLY USE A SEPARATE APPLICATION FORM FOR EACH POST



SERIAL NUMBER

## INDEPENDENT COMMISSION AGAINST CORRUPTION

## **APPLICATION FORM**

5. Residential Telephone No. Mobile No: Email Address:  6. Particulars of Spouse  Name:  Occupation: Maiden name, if applicable:  NIC No.:  Occupation:  Address:  Phone No.:  8. Professional Qualifications/ Degrees/ Diplomas  NAME OF INSTITUTION & COUNTRY  ATTENDED FROM/TO Month/Year Month/Year Month/Year Month/Year Month/Year	1. Post Applied for:							
A. NIC No. Nationality: Passport No:  5. Residential Telephone No. Mobile No: Email Address:  6. Particulars of Spouse  Name: Occupation: NIC No.: NIC No.: NIC No.: Address: Phone No.:  7. Particulars of Parents or Step Parents  Name: NIC No.: Occupation: Address: Phone No.:  8. Professional Qualifications/ Degrees/ Diplomas  NAME OF INSTITUTION & COUNTRY Month/Year Month/Year ATTENDED FROM/TO Month/Year Month/Year OLIALIFICATIONS  NAME OF INSTITUTIONS  NAME OF INSTITUTIONS  NAME OF INSTITUTIONS  ATTENDED FROM/TO OLIALIFICATIONS	•					Title (Mr/Mrs/Ms/Miss/Dr)		
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	9. OTHER QUALIFICATIONS							
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10. HSC/ A Le	evel/ Baccalauro	eate								
0.4.1.										
Subject										
Grade										
Year:		Result:	Exa	m Centre No/	Institution:					
11. SC/ O Lev	/el		T.		i	-		T		
Subject										
Grade										
Year:		Result:	Exa	m Centre No/	Institution:	=				
12. EMPLOYN	MENT RECORD:									
Use a seperat	e block for each	post. If you ne	eed more space	, attach additio	onal pages	of the	same size.			
	EMPLOYMENT									
Post Held:										
	ess of Organizati	on:								
Date of Appoi										
Salary:										
Brief description	on of your duties									
B. PREVIOUS	S EMPLOYMEN	Т								
Post Held:								From		То
								//onth/Year	Mon	th/Year
Name & addre	ess of employer:				Reason fo	or leavi	ing:			
Brief description	on of your duties	:			<u> </u>					
Brief description	on of your duties	:								
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Brief description	on of your duties	:								

Post Held:		From	То
		Month/Year	Month/Year
Name & address of employer:	Reason for leaving:		
Brief description of your duties:			
Post Held:		From	То
		Month/Year	Month/Year
Name & address of amployer:	Peacon for leaving:	Month/Year	Montn/Year
Name & address of employer:	Reason for leaving:	Month/Year	Month/Year
Name & address of employer:	Reason for leaving:	Month/Year	Month/Year
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	Reason for leaving:	Month/Year	Month/Year
Name & address of employer:  Brief description of your duties:	Reason for leaving:	Month/Year	Month/Year
	Reason for leaving:	Month/Year	Month/Year
	Reason for leaving:	Month/Year	Month/Year
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	Reason for leaving:	MONITH/Year	Month/Year
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	Reason for leaving:	MONITH/Year	Month/Year

13. REFERENCES: List two persons, who are fa	amiliar with your work, behaviour	and performance.	
FULL NAME	ADDRESS	TELEPHONE NO.	BUSINESS OR OCCUPATION
14. ADDITIONAL INFORMATION			
A. Have you ever been arrested, charged, or s	ummoned into court as a defendant	in a criminal	NO YES
proceeding or convicted, fined or imprisoned			110 110
proceeding or convicted, lined or imprisoned	a for the violation of any law in Mauri	tids of abroad:	
B. Have you ever been subject to any disciplina	ary action or proceeding?		
C. Have you ever been suspended from the dis	scharge of your functions?		
D. Has any member of your immediate family e in Mauritius or abroad?	ver been convicted or charged with	a criminal offence	
		(i	Please tick in the above checkbox as appropriate)
If "yes", please give full particulars of each case	e in an attached statement by email.		
15. What are your hobbies?			
16. What motivates you to join the ICAC? (Description s	should not exceed 1000 words/characters)		
17. A. I certify that the information provided in completing this form, I understand that if I wilfu			
disqualification for appointment to the service of			
include dismissal, if already in service of ICAC.	·		, ,
B. I also understand and accept that the information	ation given in the application form w	ill be used for the purpos	e of integrity checking and will be
divulged to law enforcement agencies and departi	ments/agencies concerned with sec	urity, prevention and de	tection of crime to determine my
suitability for appointment.			
C. In connection with my application for emplo	oyment with the Independent Comm	nission Against Corrupti	on (ICAC), I authorize my former
employers or any other authority or person to p			
Commission may visit my home and may interview	<i>i</i> my family members, relatives, past	and present employers	and my personal referees
DATE:	SIG	SNATURE:	
Name in Block Capitals:			
Note: ALL INFORMATION WILL BE TREATED AS ST	RICTLY CONFIDENTIAL and will be us	sed exclusively for appoin	tment to the ICAC & other
employment related purposes.			