



INDEPENDENT BROADCASTING AUTHORITY
Level 2, The Celicourt, 6, Sir Celicourt Antelme Street,
Port Louis
Tel: 213 3890, Fax: 213 3894 E-mail: iba@intnet.mu

APPLICATION FORM

FOR OFFICE USE INDEX NO.....

1. Post Applied for.....
2. Date of Advertisement:.....
3. Surname:.....(Mr/Mrs/Miss)
 (in block letters)
 Other Names:.....
 (in block letters)
 Maiden Name (if applicable):.....
4. Date of Birth:.....
5. National Identity Number:.....Nationality:.....
6. Address:.....
7. Tel No.(Res).....(Office).....
8. *Present Employment:.....

- *Previous Employments:.....

**(state most recent post(s) held, name, addresses of employers)*

9. **QUALIFICATIONS:**

Professional Qualifications (starting with latest):

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POST SECONDARY QUALIFICATIONS:

Certificate/Diploma/Degree.....	
<i>Name of Institution:.....</i>	
<i>Year started: Graduation Year :..... Month:.....</i>	
Main subjects	Grade

SECONDARY EDUCATION

State whether Cambridge Higher School Certificate, GCE (A) Level or Equivalent.....	
<i>Month/Year :...../..... Exam Centre No..... Index No.....</i>	
<i>Secondary School attended:.....</i>	
Subjects	Grade

State whether Cambridge School Certificate, GCE (O) Level or Equivalent.....
Month/Year :...../.....
 Exam Centre No..... Index No.....
 Secondary School attended:.....

Subjects	Grade

Certificate of Primary Education “CPE” (where applicable) Year:.....

	Grade		Grade		Grade
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10. Experience and skills relevant to the post applied for. (State to what extent you possess such experience and attach documentary evidence)

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11. (a) Have you ever been prosecuted before a court of law for any offence and subsequently found guilty. (If yes, please give details). Please produce certificate of morality where applicable

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(b) Have you ever been dismissed from any previous employments on any grounds whatsoever? (If yes, please give details).

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12. Please give reasons(s) why you want to work for the post applied for:

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13. Do you, your spouse or any close relative have any financial interest in a body corporate or other body which is a licensee of the IBA?

14. IMPORTANT –PLEASE READ THE ADVERTISEMENT CAREFULLY: Incomplete, inadequate or inaccurate filling of the form may cause the applicant’s elimination. It is an offense to give false information or to conceal any relevant information. This may lead to an application being rejected or, if a candidate has already been appointed, to the termination of his appointment.

DECLARATION

I,, the undersigned applicant, declare that the particulars in this application are true and accurate and that I have not wilfully suppressed any material fact.

Date.....

Signature.....