

APPLICATI		SEWERAGE			
		NAL, TECHNICAL, C			
NAME IN FULL (BLOCK I	LETTERS):				
Any change of name at	bar than by marris		(GIVEN NAM	ES)	
Any change of hame, of	ner than by marna	ge, giving date and method	for change		
SEX: Male Female TELEPHONE NUMBER:					
DATE OF BIRTH:AGE AT LAST BIRTHDAY:AGE AT LAST BIRTHDAY:					
(А сору от уош		Baptismal Certificate is suf		istry of	
PLACE OF BIRTH:					
(If born outside of Trinid					
Arrived in Trinidad and 1	lob ago by:	DATE:			
(If by sea, give name of vessel)					
If Naturalised, give prev	ious Nationality: _				
If Alien, give number,	date and place o	of issue and date of expir	ation of last or prese	ent Passport or	
Certificate of Identity					
MARITAL STATUS: Sing	le Married	Widowed	ivorced Commo	on-Law	
HUSBAND'S NAME OR	WIFE'S MAIDEN NA	AME:			
NUMBER OF CHILDREN:		SONS:	AGES:		
		DAUGHTERS:	AGES:		
<b>ΕΛΤΗΕΒ'S ΝΛΜΕ</b>					
PROFESSION OR OCCU					
MOTHER'S MAIDEN NAI	ME:				
(Above information sho	uld be given even t	hough mother or father may	y be deceased).		
POSSESSION OF VALID	DRIVER'S PERMIT	: Yes No			
EDUCATION	EDUCATIONAL INSTITUTE		DATE OF ENTRY	EXAMINATION	
			AND LEAVING	PASSED	
Mention the schools, colleges &					
Universities at which					
you received your education,					
professional as well					
as general and give in each case the date of					
entry and any examinations passed.					
oraniniations passed.					
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If the G.C.E. certificate is held, the subjects passe Professional qualifications	d must be stated. Copies of qualifications should be furnished.				
(if any), the date at which					
each was obtained.					
EMPLOYMENT HISTORY					
From the completion of education to present					
time, mention each position held by you, the					
dates between which you held it, the reason					
for leaving and salary you received in each					
position.					
Appointment desired e.g. Clerk I, Clerk/Typist					
	(Officers may be required to serve in any part of Trinidad and Tobago).				
From what date will you be available to					
accept.	(a) Acting Appointment				
	(b) Permanent Appointment				
The above particulars are true to the best of my knowledge.					
I am prepared to serve in any part of Trinidad and Tobago.					
DATE OF APPLICATION	SIGNATURE OF APPLICANT				
REFEREES					
Cive the nemes and addresses of two (2)					
Give the names and addresses of two (2) referees. They should be responsible					
persons who know you well either in private life of business and one at least should be					
well acquainted with you in private life.					
The names of distinguished persons should not be given unless they really know you					
well and names of relatives or of those from					
whom you send testimonials should not be given.					
- /					
Give the names and addresses of previous and present employers.					

## **TESTIMONIALS**

Give the names, addresses and occupation of the writer of each of your testimonials. Not more than three (3) copies should be submitted for records in the Water and Sewerage Authority. Copies may be in manuscript, in print or may be typewritten and it is desirable, though not absolutely necessary, that they should be on foolscap paper not longer than this form.