SLASPA
SAINT LUCIA AIR AND SEA PORTS AUTHORITY

JOB APPLICATION FORM

1. **Name:** _____

2. **Mailing Address:** _____

_____

3. **Telephone No.(s) :** _____ _____ _____
(Home) *(Work)* *(Cell.)*

4. **Sex:** **Female** ☐ **Male** ☐

5. **Date of Birth:** _____ 6. **Place of Birth:** _____

7. **Nationality:** _____

8. **Marital Status:** **Single** ☐ **Married** ☐ **Widowed** ☐ **Divorced** ☐

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9. **Education** (*Please attach certified copies of certificates*)

Schools Attended	***Years From - To***	***Qualifications Attained*** (*CXC, Diploma, Degree etc.*)

10. **Employment History**

Company	***Years From – To***	***Position Held***

11. **Position Applied For:** _____

12. **Applicant's Signature:** _____ **Date:** _____