

APPLICATION FORM A – MSG SMS 2012

Please insert
passport photo



A. APPLICANT DETAILS

A1 Title: Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐ Dr. ☐ Professor. ☐ (tick appropriate box)

A2. Surname A3. Middle name: A4. First Name:

A5. Date of birth (day/month/year): A6. Place of birth

A7. Sex (tick appropriate box)
Male ☐ Female ☐

A8. Current Residential Address:

A9. Personal contact - Tel: Fax: Email:

A10. Marital Status: Single ☐ Engage ☐ Married ☐ Separated ☐ Defacto ☐ Divorce ☐

A11. List names of dependants (if any)	A12. Relationship to applicant	A13. Date of birth of dependants
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

B. IDENTIFICATION DETAILS

B1. Nationality (tick appropriate box): Fiji ☐ Solomon Islands ☐ Vanuatu ☐ PNG ☐

B2. Country of Residence:

B3. Passport Number: B4. Expiry date of passport:

B5. Country where passport was issued:

B6. Other Country with Passport(s) if any e.g. Dual citizenship:

B7. Other Form of ID and their Number(s):

C. CURRENT EMPLOYMENT DETAILS

C1. Employment Status (tick appropriate box):

Employed

☐

Unemployed

☐

Self –employed

☐

Others, please specify

C2. Name of Employer if employed:

C3. Address of Employer:

C4. Contact details of Current Employer:

C5. Occupation/Title:

C6. Date of Commencement in Current Job:

D. NEW EMPLOYMENT DETAILS

D1. Job Offer (tick appropriate box):

Public sector

☐

Private sector

☐

Company transfer

☐

Job attachment

☐

Others, please specify:

D2. Name of New Employer in this application

D3. Location by Country:

D4. Location by City/Town

D5. Name of Occupation/Position:

D6. Do you have an Employment Agent for this application? Yes ☐ No ☐ If yes please provide details below:

Name:

Telephone:

Fax:

Email Address

City/Country:

E. QUALIFICATION & SKILLS

E1. Qualification	E2. Name of Institution/Provider	E3. Year of Graduation	E4. Other Skills & Experience	E5. Other recognized Affiliation / Association

F. CHECKLIST OF ATTACHMENTS

- ☐ F1. **Health** – Attach a copy of your most recent Medical report from a certified doctor.
- ☐ F2. **Police Clearance** – Attach an original copy of your police clearance report of not more than 1 month old from your current country of origin and country of residence if they are 2 different countries.
- ☐ F3. **Employment Reference** – Attach at least 2 referees' contact details, same as those used in your application letter to your employer, include contact details.
- ☐ F4. **Birth Certificates** – Attach your birth certificate and your dependant(s)' if required.
- ☐ F5. **Marriage Certificate** – Attach your marriage certificate, if required.
- ☐ F6. **Employment CVs** – Attach your most current CV.
- ☐ F7. **Employment Agent** – Attach a brief **supporting letter** and an **Employment Agency Registration Number** from your Employment Agent if you are using one.
- ☐ F8. **Employment Contract** – Attach a copy of your signed contract.
- ☐ F9. **Qualification** – Attach certified copy of Qualification(s) listed under E1 above.

Official Use Only

A) Sending Country

A1. Date of receipt:	<input type="text"/>	A2. Current ISCO code (if employed)	<input type="text"/>
A3. Name of Authority:	<input type="text"/>	A4. Position	<input type="text"/>
A5) Status of Application: Complete <input type="checkbox"/> Incomplete <input type="checkbox"/>		A6. Signature:	<input type="text"/>
A7. Official Stamp:			
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>			

B) Receiving Country

B1. Date of receipt:	<input type="text"/>	B2. New ISCO code:	<input type="text"/>
B3) Name of Authority:	<input type="text"/>	B4) Position:	<input type="text"/>
B5) Work Permit # (if approved):	<input type="text"/>	B6) Date of issuance of work permit:	<input type="text"/>
B7) Expiry date of work permit:	<input type="text"/>	B8) Residency Permit #:	<input type="text"/>
B9) Date of issuance of residency permit:	<input type="text"/>	B10) Date of expiry of residency permit:	<input type="text"/>
B11) Approve/Decline:	<input type="text"/>	B12) Signature:	<input type="text"/>
B13) Official Stamp:			
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>			