

MPP/HR-RS4B

Application Form ICT Support Technician

Applicant No. (office use only)	Intake (office use only)
Instructions: • Applicant must be at least 21years of age at time of application; • This form must be completed and signed by the	Attach photograph (passport size)
 applicant; Please read all questions and instructions carefully; Complete all sections of the form accurately and honestly; Attach all supporting documents – copies of originals and Refer to checklist on the back page before submitting your application. 	
1. Personal Details	Birth Certificate & Passport Yes No
Mr. Mrs. Ms.	Photo Attached
	Place of Birth
Surname (Family Name)	
	Country
Given Names (In full)	
	Are you a Samoan Citizen? Yes No
Other Name(s)	4. Motor Driver's Licence
	Do you hold a valid and current Driver's Licence? No
2. Contact Details	Copy of Driver's Licence attached Yes No
Village/Place of Residence	5. Education
	Qualification and Institution/ Date Date
Mailing Address	Major Area of Study School Started Finished
Contact Number	
Contact Number	
Email	Certified copy of each qualification and transcripts attached Yes No
3. Birth Details Date of Birth Age	6. COVID 19 Vaccination Have you've been fully vaccinated With Covid 19? Yes No
Date of Birth Age	Copy of Vaccination Card Yes No



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7. Training			Job/Position Title/Rank
Training/Courses Relevant to	Selection Cri	teria ONLY	
Training/Course	Year(s)	Duration	
			Number of Staff Supervised
			Main responsibilities & key achievements
			Main responsibilities & key achievements
			Manager/Supervisor and Contact
			Name:
	1		Email: Phone Number:
Certified copy of training/cou	rses	Yes No	Priorie Number:
attached			0.2 New Province French
O F			8.3 Next Previous Employment
8. Employment			Employer and Address
8.1. Current/Most Recent Em	plovment		
Employer and Address	p. 6 y		
			Employed From To
	-		
Employed From	То		Job/Position Title/Rank
			Job/ Position Title/ Rank
Job/Position Title/Rank			
			Number of Staff Supervised
Number of Staff Supervised			
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			Main responsibilities & key achievements
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			M (6)
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Manager/Supervisor and Conf	IdCl		Name: Email:
Name: Email:			Phone Number:
Phone Number:			THORE NUMBER
Linear			9.4 Novt Dravious Employment
8.2. Previous Employment			8.4 Next Previous Employment Employer and Address
Employer and Address			Employer and Address
			Employed From To
Employed From	То		



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Job/Position Title/Rank	12. <u>Declaration of Close Relations</u> Do you have a close relation (family ties) to an individual(s) currently employed anywhere in the Samoa
Number of Staff Supervised	Police Service?
Number of staff supervised	Yes No
Main responsibilities & key achievements	If yes, please provide name(s) of your relations and state nature of relationship
Wall responsibilities & key deflevements	
	13. <u>Community Status</u> Outside the work environment, do you hold any
Manager/Supervisor and Contact	positions (including matai titles) associated with
Name: Email:	community services, and if so, please specify below?
Phone Number:	
9. <u>Language Proficiency</u> Tick to indicate your Language proficiency	
English Samoan	14. References Please provide at least two written references from
1. Speak	previous employers or supervisors or community
Fair	members other than family or relatives who have known
Fluent	you for no less than 12 months.
2. Read Fair	Defence 1
Fluent	Referee 1 Name:
3. Write	Name.
Fair	Relationship:
Fluent	Length of Acquaintance:
10. Computer Literacy	
(Competency Level): 1 = no knowledge; 2 = basic knowledge; 3 = good working knowledge; 4 = advanced capability	Contact details: Telephone: Email:
Word	Written Reference Provided Yes No
Excel	Referee 2
PowerPoint	Name:
E-mail	Relationship:
Other (specify)	Length of Acquaintance:
11. <u>Discipline Records</u>	Contact details: Telephone:
Do you have a discipline record, any criminal or serious	Email:
traffic convictions or any current legal proceedings against you?	Written Reference Provided Yes No
	Referee 3
Yes No	Name:
IF YES, please provide full details including offence type, sentence/penalty:	Relationship:
	Length of Acquaintance:
	Contact details: Telephone: Email:
	Written References provided Yes No



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15	Pernance to	Selection	Critoria	(Competencies)
IJ.	Kennoune to	Jelection	Ciliella	(COMPEGNICIES)

Set out below are the selection criteria that will be used in assessing your suitability for the role. It is your responsibility to:

2. Comple 3. If you fe	aspects of work or life experience which demonstrate your ability to satisfy each criterion at true and accurate way (failure to do so will disqualify your application; and seel the need to supply additional arguments to support your fulfillment of the selection criteria listed nen please attach that information to this application form
1.	Skills and Abilities (Refer JD for full details)
2.	Personal Attributes (Refer JD for full details)
3.	Experience and Past Work Performance (Refer JD for full details)
4.	Qualification (Refer JD for full details)



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16. <u>Personal Statement</u>
In your own handwriting, please write a 100-word summary on why you think you should be considered for the position as
advertised.
17. <u>Declaration</u>
I hereby declare that the information I have provided in this application is correct and complete.
• I acknowledge that I will be required to undergo a screening process involving the SPS making integrity and background
checks and inquiries about myself from current and previous employers, police, courts, educational institutions, community members and other similar agencies.
I hereby consent and authorize the SPS to make all such inquiries and checks including the release and disclosure of all
information about myself by any person or body to the SPS, for the purpose of confirming the information provided in
this application and in determining my merit for appointment to the above mentioned position.
Signed
Full Name (Drint)
Full Name (Print)
Date



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Application Checklist:

Prior to submitting your application, please check that you have completed all of the following and that all supporting documents are attached (Note: N/A means 'Not Available'):

Office Use only		Yes	No	N/A
	1. Have you provided all of your personal details in Part 1?			
	2. Have you provided your contact details in Part 2?			
	3. Have you attached a certified copy of your Birth Certificate & Passport Photo as in Part 3?			
	4. Have you attached a certified copy of your Driver's License as in Part 4	?		
	5. Have you attached certified copies of all educational qualifications and transcripts as in Part 5?			
	6. Have you attached a certified copy of you COVID 19 Vaccination Card as in Part 6?			
	7. Have you attached certified copies of all relevant training attended as i Part 7?	n		
	8. Have you listed all details of your current and previous employment as in Part 8?	;		
	9. Have you completed the Language Proficiency in Part 9?			
	10. Have you completed the Computer Literacy in Part 10?			
	11. Have you provided details relating to any discipline records that you have as in Part 11?			
	12. Have you disclosed details of any close relation that you have with an individual(s) currently employed in the SPS as in Part 12?			
	13. Have you provided details on any community status that you hold as in Part 13?	n		
	14. Have you provided details of a minimum of three referees to be contacted in confidence for further information regarding your application as in Part 14?			
	15. Have you addressed the Selection Criteria required in Part 15?			
	16. Have you completed the Personal Statement required in Part 16?			
	17. Have you signed the declaration in Part 17?			