The Carib Jack Group of Companies Limited

Cedar Trees, Charlestown, Nevis
Built for Service, Built for the Future!

EMPLOYMENT APPLICATION FORM

Position Applied For: _____

Personal Information

Full Name: _____

Date of Birth: _____ Gender: _____

Address: _____

Phone Number: _____ Email: _____

National ID / Passport No.: _____

Driver's License / Vehicle Operation

License No.: _____ Class / Type: _____

Expiry Date: _____ Issued In: _____

Employment History

List your last two employers (most recent first):

Employer Name: _____ Phone: _____

Position Held: _____ Duration: _____

Reason for Leaving: _____

Employer Name: _____ Phone: _____

Position Held: _____ Duration: _____

Reason for Leaving: _____

Education / Certifications

Institution Name: _____ Qualification: _____

Year Completed: _____ Other Training: _____

References

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Availability & Work Preferences

Available Start Date: _____ Preferred Work Type (Full-time / Part-time): _____

Are you willing to work early mornings or weekends? Yes ☐ No ☐

Declaration

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that false or misleading information may result in my disqualification or termination if employed.

Applicant's Signature: _____ Date: _____