

Job Application Form

Form 2

Form must be completed by Applicant whether Public Servant or Non Public Servant

Section	1: Po	osition	Details
---------	-------	---------	---------

Ministry	Section	Location		
MCIT	ICT SECTOR COORDINATOR UNIT	LEVEL 6, TATTE BUILDING		
Position Code CTP25005	Title ACEO ICT Sector Coordinator	Supervisor Position Code CT002690		
		Salary Grade ACEO	Salary Rate \$94,624.00	

Section 2: Personal Details

First Name:	Last Name:	Other Names:
Gender:	Date of Birth:	NPF No:
Marital Status:	Physical Address (1):	Physical Address (2):
Post Code:	Phone No (1):	Phone No (2):
e-Mail:	Facimile:	

Section 3: Education Details

Most recent qualification	Major Area of Study	Institution Attended	Date Started	Year Graduated

Section 4: Training History

Courses Relevant to Selection Criteria ONLY	Institution/Country	Dates

Section 5: Employment History

Current / Most recent Position

Employer's Name	Date	Duration
Position Title	Number of Staff	reporting to you
Main Responsibilities		

Next previous position

Employer's Name	Date	Duration
Position Title	Number of Staff	reporting to you
Main Responsibilities		

Next previous position

Employer's Name	Date	Duration
Position Title	Number of Si	aff reporting to you
Main Responsibilities		

Next previous position

Employer's Name	Date	Duration
Position Title	Number of Staff	reporting to you
Main Responsibilities		

Section 6: Selection Criteria

Based on an analysis of the duties of this position as determined by the Manger responsible, set out below are the criteria that will be used in assessing the suitability of each Applicant for the position. Please address each selection criteria on a separate sheet and attach to this form.

It is the Applicant's reponsibility to:

- 1. indicate aspects of their work experience which indicate their ability to satisfy each criterion;
- 2. complete this information in a true and accurate way (failure to do so will disqualify the Applicant); and
- 3. supply supporting documentation should they be called for short-listed interviews.

Note: If you feel the need to supply additional arguments to support your fulfilment of the selection criteria listed below then please attach that information to this application form.

MERIT FACTORS (Job Competencies)

- 1. Skills and Abilities (refer to JD for full details)
- 1. Strategic Thinking
- 2. Building and Sustaining Relationships
- 3. Delivers/acheives results
- 4. Project Management
- 2. Personal Attributes (refer to JD for full details)

5.Integrity

6.Commitment/Personal Drive

7. Intellect and Judgement

8. Creative and Innovation

3. Experience and Past Work Performance (refer to JD for full details)

A minimum of 7-10 years of experience in project management,

including experience with procurement, financial management,

safeguards, and monitoring & evaluation, ideally within

a government or donor-funded context

- Knowldege of ICT systems, digital infrastructure and the development of sector startegies related to dogotal transformation and ICT investments.
- Demonstarted experience in coordination and oversight of donor-funded projects with familiarity in leading multi-stakeholder engagement processes, would be an advantage.

-Familiarity with Samoa's regulatory environment, public finance

management practices, and relevant legislative frameworks

-Strong interpersonal and communication skills, with the ability to

work effectively with government agencies, donors, and other

stakeholders

-Flexibility and adaptability to work in a dynamic environment with

evolving project needs

-Strong organizational and time management skills, with attention to

detail and the ability to prioritize tasks effectively

4. Qualifications (refer to JD for full details)

A Bachelor's degree (master's preferred) in Information and

Communication Technology, Computer Science, Public

Administration, Engineering, Project Management, or

a related field from a recognized institution

Section 7: Computer Literacy

Indicate competency level for each Application

Competency Level code: 1= no knowledge; 2= basic knowledge; 3= good working knowledge; 4= strong/advanced capabilities

Main Applications	Other Systems
Word processing (Word)	Database Management (Access)
Spreadsheets (Excel)	Other (specify)
Presentation PowerPoint	Other (specify)
E-mail	Other (specify)

Section 8: Knowledge of Languages

For languages other than your mother tongue, enter appropriate number from code below to indicate level of your language skills	Indicate your mother by ticking a box below	_	Speak	Read	Write
CODE	Samoan				
1. Limited conversation, reading of newspapers, routine	English				
correspondence 2. Engage freely in discussions, read write more difficult materi	Other (specify)				
3. Speak, read and write (nearly) as well as mother tongue.					

Section 9: Discipline Records Check

Do you have a discipline record; any criminal convictions; or any current legal	No	Yes
proceedings against you? (Please TICK the appropriate box)		

IF Yes, Please provide details on a separate piece of paper in a sealed envelope and attach it to this form. This information will be kept confidential and only be seen by the Assessment Committee.

Saction 10.	Declaration	of Reference
sechonto:	Declaration	or referees

Please note that you need to declare addresses and contact numbers o	of three referees.
--	--------------------

Section 11: Declaration of Close Relations Do you have a close relation (family ties) to an inidvidual(s) currently employed anywhere in the Ministry to which you are applying? (Please TICK the appropriate box) If YES, please provide name(s) of your relation(s) and state nature of relationship Section 12: Community Status Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	Referee Name	Designation	Address/	Address/Contact Numbers		
In the Ministry to which you are applying? (Please TICK the appropriate box) If YES, please provide name(s) of your relation(s) and state nature of relationship Section 12: Community Status Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	1.					
Section 11: Declaration of Close Relations Do you have a close relation (family ties) to an inidvidual(s) currently employed anywhere in the Ministry to which you are applying? (Please TICK the appropriate box) If YES, please provide name(s) of your relation(s) and state nature of relationship Section 12: Community Status Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information flavored my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	2.					
Do you have a close relation (family ties) to an inidvidual(s) currently employed anywhere in the Ministry to which you are applying? (Please TICK the appropriate box) If YES, please provide name(s) of your relation(s) and state nature of relationship Section 12: Community Status Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	3.					
in the Ministry to which you are applying? (Please TICK the appropriate box) If YES, please provide name(s) of your relation(s) and state nature of relationship Section 12: Community Status Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	Section 11: Declarat	ion of Close Relations				
Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.				No	Yes	
I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	If YES, please provide name(s) of your relation(s) and state nature of	relationship			
Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.						
Outside the work environment, do you hold any positions (including matai titles) associated with community services, and if so, please list: Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.						
Section 13: Certification And Authorisation I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.	Section 12: Commun	nity Status				
I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.		nt, do you hold any positions (including	matai titles) associated	with commu	nity services, and	
I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.						
I hereby certify that the information given in my application is true and correct. I also acknowledge that if I am appointed on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.						
on the basis of any false information that I provide my appointment will be revoked. I also authorise the Department to undertake any necessary checks to confirm the information provided by me.						
Signature Date	on the basis of any false infor	mation that I provide my appointment	will be revoked. I also a			
	Signature		Da	nte		