



REPUBLIC OF PALAU

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Office of the Public Auditor

APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT CLEARLY

If you need additional space for your answers, attach extra sheets to this application.

Position (position you are applying for)	Number (if applicable)
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PERSONAL INFORMATION AND CONTACT

Full Name

List all other names you were/are known by

Mailing Address

Present Residence

Telephone

Mobile

E-mail

Social Security Number

Citizenship

Marital Status

Gender

Date of Birth

Do you have a disability? If yes, state in details:

Do you have any chronic illnesses? If yes, state in details:

Have you ever been convicted of any felony/crime or forfeited bail? Are you presently on trial or have a case pending trial? If yes, state in details:

EDUCATION

List education, beginning with the most recent (provide copy of diploma/degree of highest level of education you have completed)

Institution

Address

Years Attended

Field of Study

Diploma/Certificate

Trainings/Development Courses (provide copy of certificate)

Training/Course	Provider	Date Completed
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Computer Proficiency

Software	Version	Basic	Intermediate	Advance
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Microsoft Word				
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Microsoft Excel				
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Microsoft Access				
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Intuit QuickBooks				
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Audit Management System				
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Other Skills

REFERENCE(S)

List 3 persons not related to you who have definite knowledge of your qualifications for the job for which you are applying. Do not list supervisors that you have listed under Employment History section.

Name	Address	Telephone	E-mail
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CERTIFICATION AND SIGNATURE

I certify that the answers I have made to all of the questions in this application are true and complete to the best of my knowledge.

I understand that:

- if this application is not completed in its entirety, it will not be processed and I will be automatically disqualified;
- once submitted, this application will be subjected to all applicable public records laws; and
- a background check may be required prior to employment and that, in accordance to Drug-Free Workplace, drug testing may be required.

I waive all provisions of law forbidding colleges or universities which I attended, or present and past employers, from disclosing any information which they acquired relevant to my education and employment. I consent that they may disclose such information to the Office of the Public Auditor

Signature of Applicant

Date

SUBMISSION INSTRUCTIONS

Additional documents to submit with this application:

- 1) Resume
- 2) Transcript of highest level of education you have completed
- 3) Copy of Degree/Diploma/Certificate of highest level of education you have completed
- 4) Police Clearance
- 5) Driver's License
- 6) Copy of Palau Social Security Card
- 7) Recommendation Letter

Application packet must be received at the Office of the Public Auditor by the closing date specified on the announcement.