



# Job Application Form

## Form 2

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

### Section 1: Position Details

Ministry SLC	Section EXECUTIVE	Location TUANAIMATO	
Position Code SLCE2922	Title INTERNAL AUDITOR	Supervisor Position Code GM	
		Salary Grade S11 L1	Salary Rate \$61,464 p.a minimum

### 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

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

## Next previous position

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

## Next previous position

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

## Next previous position

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

**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 responsibility 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) Sound understanding of accounting standards, financial systems, internal audit best practice and frameworks for assessing performance. ESSENTIAL
- (2) Sound understanding of applicable legislative and regulatory frameworks governing state owned enterprise financial management. ESSENTIAL
- (3) Sound understanding of best practice anti-corruption strategies and measures. ESSENTIAL.
- (4) Sound understanding of working knowledge of professional internal audit performance standards with regards to planning, auditing, sampling and documentation. ESSENTIAL.

**2. Personal Attributes (refer to JD for full details)**

- (1) Strong analytical capability and problem solving skills. ESSENTIAL  
 (2) Meticulous attention to detail with the ability to multitask. ESSENTIAL  
 (3) Ability to work under pressure and meet tight deadlines. ESSENTIAL  
 (4) Good interpersonal skills with a proven ability to communicate effectively (both written and verbal). ESSENTIAL  
 (5) Sound understanding of Information Technology. ESSENTIAL  
 (6) Ability to work independently and as part of a team. ESSENTIAL  
 (7) Personal integrity with strong ethics and values consistent with SLC culture. ESSENTIAL

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

At least 5 years of internal audit work experience. ESSENTIAL

**4. Qualifications (refer to JD for full details)**

- (1) Minimum qualification of a Bachelor of Commerce or Accounting degree. ESSENTIAL  
 (2) Professional development training in audit. DESIRABLE  
 (3) PROFESSIONAL CERTIFICATION:  
 Accreditation with the Institute of Internal Auditors (IIA) DESIRABLE

**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

**CODE**

1. Limited conversation, reading of newspapers, routine correspondence  
 2. Engage freely in discussions, read write more difficult materi  
 3. Speak, read and write (nearly) as well as mother tongue.

Indicate your mother tongue by ticking a box below	Speak	Read	Write
Samoan			
English			
Other (specify)			

**Section 9: Discipline Records Check**

Do you have a discipline record; any criminal convictions; or any current legal proceedings against you? (Please TICK the appropriate box)

No

Yes

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.

**Section 10: Declaration of Referees**

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

Referee Name	Designation	Address/Contact Numbers
1.		
2.		
3.		

**Section 11: Declaration of Close Relations**

Do you have a close relation (family ties) to an individual(s) currently employed anywhere in the Ministry to which you are applying? (Please TICK the appropriate box)

No

Yes

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.

Signature	Date
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