



Employment Application Form

Complete all relevant fields. Tick the applicable options. Write N/A where needed. Attach the documents on page 3.

Position number: _____ Date advertised: _____

Position title: _____

Advertisement source

☐ Print media (National / Post Courier) ☐ Social media ☐ Internal advert

Attach passport
size photo

1 Personal particulars

First name

Middle name

Last name

Sex

Date of birth if known

Age

Marital status: ☐ Married ☐ Single ☐ Divorced ☐ Widow ☐ Widower

Spouse full name if married

Spouse occupation

Spouse signature

Date

If married, number of children: _____ Enter their details below.

No	Child full name	M/F	Age	School	Grade
1					
2					
3					
4					
5					
6					
7					

Contact and emergency details

Home address or present address for contact

Village

Local Level Government

District

Province

Phone number

Mobile number

Email address

Fax number

Emergency contact person

Emergency phone number

Emergency email address



2 Education

Name of high school attended

Highest grade reached: ☐ Grade 10 ☐ Grade 11 ☐ Grade 12

Attach a copy of your certificate.

Name of tertiary education institution attended

Qualifications including basic and postgraduate qualifications

3 Employment and work experience

Current status: ☐ Employed ☐ Unemployed ☐ Part time worker

Are you registered for the current year? ☐ Yes ☐ No ☐ Not applicable

List your past employment history

No	Institution or employer	Years worked	Position and responsibilities
1			
2			
3			
4			
5			

If currently employed, is your employer willing to release you?

☐ Yes ☐ No ☐ Not applicable

Are you willing to work at the centre where the selection committee posts you, including outstation Health Sub Centres and Aidposts?

☐ Yes ☐ No

Have you ever been suspended or dismissed from employment? ☐ Yes ☐ No

If yes, briefly explain why.

Do you or your spouse drink alcohol, smoke or chew betelnut? Please provide details.



4 Religious belief

Do you believe in Jesus as Lord, and are you trying to live for Him? ☐ Yes ☐ No

Have you been baptised in a church? ☐ Yes ☐ No

If yes, which church

Tell us about your Christian life and what being a Christian means to you.

Do you and your family understand that this Christian health service is run by ECPNG, and agree to live by its principles and conditions of employment?

☐ Yes ☐ No

Applicant signature

Date

Spouse signature if applicable

Date

Documents to attach

Return the completed form with the following documents. Tick each item enclosed.

No	Required document	Tick
1	Updated Curriculum Vitae or resume.	☐
2	Reference letter from your current or previous employer, if relevant.	☐
3	Reference letter from your pastor, missionary or church leader.	☐
4	Copies of high school and tertiary certificates, including Nursing or CHW Training School, School of Medicine, or other technical and administrative institutions; registration certificates and registration payment receipt.	☐
5	A statement explaining why you would like to work with ECPNG Health Services, at least half an A4 page.	☐
6	Birth certificate and NID card.	☐
7	Police clearance.	☐
8	Medical certificate.	☐
9	Completed employment application form.	☐
10	Cover application letter of no more than two pages.	☐

Submit your application

The Human Resource Officer
ECPNG Health Service Lower Fly
Balimo Hospital and Associated Health Facilities
PO Box 04, Balimo, Delta Fly District
Western Province, Papua New Guinea

Phone: +675 71885547 | Email: jobs@ecpnghs.org