

**APPLICATION FORM**

**FOR POSTS IN**

**THE PARISH COURTS OF JAMAICA**

**NAME OF APPLICANT:** \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

**SECTION A - Personal Details**

Full name \_\_\_\_\_

Nationality(ies) \_\_\_\_\_

Date and Year of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number(s) \_\_\_\_\_

E-mail Address(es) \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number(s) \_\_\_\_\_

Fax Number \_\_\_\_\_

E-mail Address(es) \_\_\_\_\_

Please indicate the address to be used relating to this application      Business \_\_\_\_\_      Home \_\_\_\_\_

Marital Status      Single \_\_ Married \_\_ Widowed \_\_ Divorced \_\_ Separated \_\_

Spouse's or former spouse's names (in full) \_\_\_\_\_

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Spouse's or former spouse's maiden names (in full) \_\_\_\_\_

\_\_\_\_\_

Spouse's nationality at birth, date and place of birth \_\_\_\_\_

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Spouse's present occupation, name and address of employer \_\_\_\_\_

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Number of Children

son(s)

Date(s) and Place(s) of Birth

\_\_\_\_\_

\_\_\_\_\_

daughter(s)

Date(s) and Place(s) of Birth

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Father's name (in full)

\_\_\_\_\_

Father's occupation

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Father's nationality at birth, date and place of birth \_\_\_\_\_

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Father's Address

\_\_\_\_\_

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Mother's name (in full)

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Mother's occupation

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Mother's nationality at birth, date and place of birth \_\_\_\_\_

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Mother's address \_\_\_\_\_

Brothers' and Sisters' names (in full) \_\_\_\_\_  
with dates and places of birth, their  
present addresses and occupations: \_\_\_\_\_

If selected, about how soon  
would you be available? \_\_\_\_\_

Give particulars of any ailment  
(physical, medical or mental)  
from which you have suffered/  
are suffering \_\_\_\_\_

**SECTION B - Education and Professional History**

**(1) Education History**

(Please list in chronological order beginning with secondary education, the names of schools, universities and other learning institutions attended and degrees, diplomas, certificates awarded)

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**(2) Other Training (if applicable) e.g. Courses, Seminars, Workshops**

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**Date called to the Bar**

Jamaica \_\_\_\_\_

England \_\_\_\_\_

Other (please specify) \_\_\_\_\_

Please give an indication of the main areas of law in which you specialize, if any.

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**(3) Work Experience**

(Please give details of your work experience starting with the most recent, including dates and particulars of the type of work done. Where applicable please state whether the work was of a managerial or supervisory nature.)

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**(4) Positions of Leadership held**

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**Section C - General**

**A. Character**

1. Have you ever been convicted of any criminal offence? Yes \_\_\_\_ No \_\_\_\_

If yes, please give details including dates \_\_\_\_\_

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2. Do you have any legal proceedings pending against you? Yes \_\_\_\_ No \_\_\_\_

If yes, please give details including dates \_\_\_\_\_

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3. Have you ever had proceedings brought against you, or paid a penalty in respect of failing to pay any debt or are there any such proceeding pending? Yes \_\_\_\_ No \_\_\_\_

If yes, please give details including dates \_\_\_\_\_

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4. Are you, or have you ever been subject to disciplinary proceedings in respect of complaints regarding a matter involving you personally or under your supervision, without the matter having been dismissed, or are there any such proceedings pending?

Yes \_\_\_\_ No \_\_\_\_

If yes, please give details including dates \_\_\_\_\_

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**B. Referees**

(Please state the names, occupations and addresses of three persons (one of whom should be a Judge) who you think will be able to comment on your qualities and experience.

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

Tel. No. \_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

Tel. No. \_\_\_\_\_

E-mail \_\_\_\_\_

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

Tel. No. \_\_\_\_\_

E-mail \_\_\_\_\_

State your Height \_\_\_\_\_ Weight \_\_\_\_\_



Please paste below a recent passport-sized photograph of yourself.

I declare that the information given is true to the best of my knowledge and belief.

Signature of Applicant

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Date

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