

CONFIDENTIAL

APPLICATION FORM

Please complete by typing all five pages of this form in black ink.

Do not attach a CV, as only the information contained in this form will be considered during the selection process.

Please return this form to:
Rwanda.jobs@actionaid.org

Post applied for:

Where did you see this post advertised?

Personal Details

Last Name:

First Names:

Address:

Nationality:

Male/

Telephone No:

Contact telephone no(s) and convenient times for us to contact you:

Email address:

IMPORTANT INFORMATION - GUIDANCE NOTES ON COMPLETING APPLICATION FORM

COMPLETING THE FORM

Please make sure your application form is well presented.

- Please type in black ink.
- **Job Description and Person Specification** - read these carefully as they list the skills, knowledge, qualifications and experience required
- The text boxes in the “career history” section are expandable. Make a copy of your completed form for your own reference
- Education and Professional Qualifications – AA is primarily interested in the range and diversity of the educational level you have achieved, as well as whether you have basic numeracy and literacy skills in English, which is the language in which we work.
- Please do not send in your CV unless specifically asked to. The application form is the only information used for the final short-listing.

RETURNING THE COMPLETED FORM

Your completed application form should be returned to the email address

Rwanda.Jobs@actionaid.org and should be sent no later than the stated closing date. We are unable to consider late applications.

Only applicants who are short listed will be contacted.

Please inform us if at any stage after submission of your form you decide not to proceed with your application.

CONFIDENTIAL - APPLICATION FORM – FINANCE AND GRANTS COORDINATOR, ACTIONAID RWANDA

Please complete clearly and electronically and send to:

Date of Application:

Position Applied for:

Personal Details

Surname First Names:
(Mr)

Address
Post Code (If
Applicable)
Telephone no.

Home		Work (discretion will be used)	

email address

Qualifications / Training

Schools, Colleges, University etc.: *If offered a post with ActionAid, you may be required to provide evidence of your qualifications*

Institution	From	To	Award/Qualification	Field of study of study

Other relevant training or short in-service courses:

Course	From	To	Details

Please continue a separate sheet if necessary)

You will be required to present proof if successful.

Employment

Present or most recent employer: (if appropriate)

Name and address of employer			
Dates employed	From:		To:
Supervisor's Job Title:			
Your Job Title			
Summary of duties			
Current / most recent salary			
Reason for leaving			
Notice Required			

Other employment / experience (most recent first)

Please include experience relevant to this post which you may have gained outside paid employment, including voluntary work

Employer's name & address	From	To	Position held and duties	Reason for leaving

Further Information

Tell us how your experience, skills, knowledge and qualities make you suitable for appointment to this post.

Please indicate your experience and what your actual role was in the following competency areas:

COMPETENCY 1). Financial Management and Reporting

COMPETENCY 2). Treasury Functions

COMPETENCY 3). *Budgets and Budgetary Control*

COMPETENCY 4). *Payroll Supervision*

COMPETENCY 5). *Financial Policy Management*

COMPETENCY 6). *Management of Grants*

COMPETENCY 7). *Internal controls and budget/cash flow monitoring*

References (one should be your current or most recent employer)

In the event of your being offered a position with ActionAid, we shall seek references **covering the full five years preceding your start with us.** Wherever possible, referees should be from the place(s) of employment, or education/training, or other establishments you have been attached to during this period. Please name at least two referees even if you have been at the same establishment for the past five years.

We do not approach referees before interview, and we obtain your permission prior to contacting them.

	Referee 1	Referee 2
Name		
Job Title		
Address		
Post Code		
Telephone no.		
Email address		
Relevant Dates of Employment with Reference		

I declare that, to the best of my knowledge, the information on this form is correct

Signed: Date: