



**KENYA URBAN ROADS AUTHORITY**  
*Efficient and safe urban roads*

**JOB APPLICATION FORM**

Application Guidelines

1. Download this form as a word document, fill all the details and print
2. Alongside the printed form attach the following:
  - a. Copies of certificates and testimonials
  - b. Copy of National ID/Passport
  - c. Application/cover letter
  - d. Curriculum Vitae

| GENERAL INFORMATION   |   |                |           |             |               |
|---|---|----------------|-----------|-------------|---------------|
| <b>Name</b>   | Title (Dr/Mr/Ms/Mrs/Miss)   | Last (Surname) | First     | Other names |               |
| <b>Contacts</b>   | P.O. Box  | Postal Code    | Town      | Phone No    | Email Address |
| DOB<br>(dd-mm-yyyy)   | Gender(Tick one)<br>M <input type="checkbox"/> F <input type="checkbox"/> | ID/Passport No | Ethnicity | Home County |               |
| Any Disability?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>   | If yes, please describe briefly   |                |           |             |               |
| <b>Other Personal Details</b>   |   |                |           |             |               |
| Have you ever been convicted of any criminal offence or a subject of probation order? Yes <input type="checkbox"/> No <input type="checkbox"/>          |   |                |           |             |               |
| If yes, state nature of offence, the year and duration of conviction.....<br>.....<br>.....   |   |                |           |             |               |
| Have you ever been dismissed or otherwise removed from employment? Yes <input type="checkbox"/> No <input type="checkbox"/>                             |   |                |           |             |               |
| If Yes, State reason (s) for dismissal/removal and effective date (dd/mm/yy)<br>.....<br>.....  |   |                |           |             |               |
| <i>(Declaring the above information will not necessarily debar an applicant from employment in KURA. Each case will be considered on its own merit)</i> |   |                |           |             |               |

| <b>POSITION</b>        |                       |
|------------------------|-----------------------|
| Position Applying for: | Job Ref:              |
| Current Salary (Ksh):  | Expected Salary(Ksh): |

| <b>EDUCATION</b>  |                      |                            |                    |
|---|----------------------|----------------------------|--------------------|
| <b>Education</b>  | <b>Area of Study</b> | <b>Name of Institution</b> | <b>Compl. Year</b> |
| <i>Note: If more than one certificate for each category, please separate with a comma</i> |                      |                            |                    |
| Doctorate   |                      |                            |                    |
| Masters   |                      |                            |                    |
| Post Graduate Diploma   |                      |                            |                    |
| Bachelors   |                      |                            |                    |
| Advanced/Higher Diploma   |                      |                            |                    |
| Diploma   |                      |                            |                    |
| Advanced Certificate  |                      |                            |                    |
| Certificate   |                      |                            |                    |
| A level   |                      |                            |                    |
| O Level   |                      |                            |                    |

| <b>PROFESSIONAL CERTIFICATIONS e.g. CHRP, CPS, CPA, CISA, etc.</b> |                                       |                         |                                   |
|--|---------------------------------------|-------------------------|-----------------------------------|
| <b>Certificate</b>   | <b>Certification Body/Institution</b> | <b>Registration No.</b> | <b>Year of Registration (yyy)</b> |
| 1.   |                                       |                         |                                   |
| 2.   |                                       |                         |                                   |
| 3.   |                                       |                         |                                   |

| <b>PROFESSIONAL MEMBERSHIP/AFFILIATIONS e.g. IEK, IHRM, ICPAK, KIM, etc.</b> |                          |                      |
|--|--------------------------|----------------------|
| <b>Membership name</b>   | <b>Registration body</b> | <b>Membership No</b> |
| 1.   |                          |                      |
| 2.   |                          |                      |
| 3.   |                          |                      |

**OTHER TRAININGS**

| <b>Training</b> | <b>Certificate</b> | <b>Institution</b> | <b>Year (yyyy)</b> |
|-----------------|--------------------|--------------------|--------------------|
| 1.              |                    |                    |                    |
| 2.              |                    |                    |                    |
| 3.              |                    |                    |                    |

**EMPLOYMENT RECORD**  
(Start with the most recent)

| <b>Employer</b> | <b>Position</b> | <b>From</b><br>(dd-mm-yyyy) | <b>To</b><br>(dd-mm-yyyy) | <b>Contacts</b><br><b>Email/Telephone</b> |
|-----------------|-----------------|-----------------------------|---------------------------|---|
| 1.              |                 |                             |                           |   |
| 2.              |                 |                             |                           |   |
| 3.              |                 |                             |                           |   |
| 4.              |                 |                             |                           |   |
| 5.              |                 |                             |                           |   |
| 6.              |                 |                             |                           |   |

**REFEREES**

| <b>Name</b> | <b>Organization</b> | <b>Position</b> | <b>Contacts</b> |
|-------------|---------------------|-----------------|-----------------|
| 1.          |                     |                 |                 |
| 2.          |                     |                 |                 |
| 3.          |                     |                 |                 |

I certify the information contained in this application is true, correct and complete. I understand that if employed, false statements reported on this application may be sufficient cause for dismissal.

Applicant's Signature.....Date.....