



THE COUNTY GOVERNMENT OF MOMBASA
MOMBASA COUNTY PUBLIC SERVICE BOARD

APPLICATION FOR EMPLOYMENT FORM

Tel: +254 715631914/ +254 780564465 Email: info.mcpsb@mombasa.go.ke

Please complete this form in **BLOCK** letters as appropriate and submit to the Secretary, Mombasa Public Service Board,
P.O.BOX 80076-80100MOMBASA, KENYA

Vacancy/Post Title:

Department:

Name of applicant: Title:.....

(Surname) First Name Other Name(s) (Prof/Dr/Mr/Mrs/Miss/Ms/Rev)

Date of Birth: Gender:

(dd-mm-yyyy)

Nationality:..... ID No/Passport No:

Permanent Address:..... Postal Code:

County of Residence : Sub County:.....

Constituency:..... Ward:.....

Current Postal Address:..... Mobile:.....

E-mail Address:.....

Alternative contact person:.....

Telephone:.....