



HUMAN RESOURCE

PERSONAL BIO DATA FORM (To be filled in Triplicate)

DATE:

PERSONAL FILE NO. ID. NO.

1. PERSONAL DATA

SURNAME

OTHER NAMES

2. GENDER. (Male/Female) Date of Birth (DateMonth.....Year.....)

3. SUB COUNTY OF ORIGINCOUNTY OF ORIGIN

4. NATIONALITY

5. ETHNIC UNIT

6. DATE OF APPOINTMENT (Date.....Month.....Year.....)

7. DATE OF ASSUMPTION OF DUTY (Date.....Month.....Year.....)

8. DATE OF CONFIRMATION (DateMonthYear.....)

9. DESIGNATION (CURRENT)

10.

11. MARITAL STATUS (SINGLE, MARRIED, WIDOWED, DIVORCED, SEPARATED)

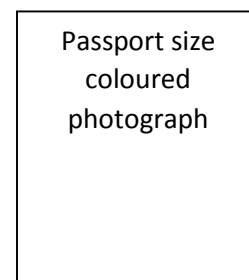
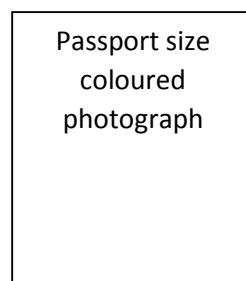
Tick as appropriate.

12. NAME OF SPOUSE(S) (Please provide copies of National ID, Marriage Certificate/Affidavit and Passport Size Photograph)

1.

2.

3.



13. IS SPOUSE(S) WORKING WITH RONGO UNIVERSITY? YES/ NO

14. IF YES, IN WHICH UNIT?

15. SPOUSE(S) PERSONAL FILE NO.SPOUSE(S) ID/PASSPORT
NO.....

16. CHILDREN'S DETAILS (Please provide Copies of Birth Certificate and Passport Size Photographs) Attach separate sheet if space not sufficient.

| NAMES | DATE OF BIRTH | GENDER |
|----------|---------------|--------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |

| | | | | |
|---|---|---|---|---|
| Passport size coloured photograph | Passport size coloured photograph | Passport size coloured photograph | Passport size coloured photograph | Passport size coloured photograph |
| Passport size coloured photograph | Passport size coloured photograph | Passport size coloured photograph | Passport size coloured photograph | Passport size coloured photograph |

17. NEXT OF KIN (In Case of Emergency)
(ADULTS MORE THAN ONE IN ORDER OF PREFERENCE)

(1) SURNAME
OTHER NAMES
ADDRESS
RELATIONSHIP
TELEPHONE NO.....

Passport size
coloured
photograph

(1)

(2) SURNAME
OTHER NAMES
ADDRESS
RELATIONSHIP
TELEPHONE NO.....

Passport size
coloured
photograph

(2)

(3) SURNAME
OTHER NAMES
ADDRESS
RELATIONSHIP
TELEPHONE NO.....

Passport size
coloured
photograph

(3)

18. CONTACT ADDRESS

- (a) HOUSE/PLOT NO: TEL:
- (b) POSTAL ADDRESS.....
- (c) E-MAIL
- (d) VILLAGE/LOCATION/ZONE
- (e) PARISH
- (f) SUBCOUNTY
- (g) COUNTY

19. RETIREMENT HOME

- (a) TEL:

- (b) POSTAL ADDRESS
- (c) E-MAIL
- (d) VILLAGE/LOCATION/ZONE
- (e) PARISH
- (f) SUBCOUNTY
- (g) COUNTY
- (h) DISTANCE (IN KM)

20. EDUCATION BACKGROUND

| | DATE | INSTITUTION | QUALIFICATION | GRADE |
|---|------|-------------|---------------|-------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |

21. FIELD OF PROFESSIONAL OR ACADEMIC SPECIFICATION

- 1.
- 2.
- 3.

22. MEMBERSHIP TO PROFESSIONAL ASSOCIATIONS (IF ANY)

- 1
- 2.....
- 3.....

23. EMPLOYMENT HISTORY DETAILS

| | EMPLOYER 1 | EMPLOYER 2 | EMPLOYER 3 |
|-----------------|------------|------------|------------|
| Employer's Name | | | |
| Postal Address | | | |
| Telephone | | | |

| | | | |
|------------------------|--|--|--|
| E-mail | | | |
| Position held | | | |
| Date of appointment | | | |
| Date left | | | |
| Date of broken service | | | |
| Date of re-appointment | | | |
| Reason for leaving | | | |

24. EXPECTED DATE OF RETIREMENT

25. SIGNATURE DATE:

26. DATE RECEIVED.....

27. OFFICERS NAME/SIGNATURE