Residential Physical Address

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Cell No.....

STA Form 1

REPUBLIC OF ZAMBIA



MINISTRY OF GENERAL EDUCATION
MOGE STATISTICAL TEACHER APPLICATION FORM 1

Instructions:

i) The form must be completed in 2 copies by all qualified trained teacher from the recognized Universities and Colleges.
ii) The application form must be submitted to the DEBS offices
iii) Everything must be in CAPITAL letters.
iv) Attach certified photocopies of Grade 12 results, College/University and NRC
v) Attach a copy of certificate of registration or proof of Registration from the Teaching Council of Zambia
vi Those with special needs must attach relevant documentations

1.0 PERSONAL INFORMATION								
1.1	Surname (in CAPITAL letters)	Other Name(s) (in CAPITAL letters)						
1.2	National Registration Card No.	Male	Female	Nationality		Date of Birth		
1.3	Place of Birth	Village	Town /City	District		Province		Other (Country)
1.4	Languages(s) spoken (Primary School Teachers only)	Marital status		Number of Children		Any disability		
1.5	College/University				Qualification obtained			
1.6	Area of specialization (for Secondary School Teachers only)				Subject 1		Subject 2	
2.0	APPLIED TO							
2.1		Province			District			

I fully accept that I will be posted where my services are needed and not necessarily to the Province and District of my choice.

2.2	Date:	Full Name:	Applicants' Signature:

3.0	FOR OFFICIAL USE ONLY (Please fill in all the spaces)
3.1	Received by (Name and Position)
3.2	Date: Serial No.

Decision of District Human Resource Management Committee: Candidate posted to:

3.3	School	District	Province	Rural/Urban