

**APPLICATION FEE \$25.00  
(NON - REFUNDABLE)**



**FOR OFFICIAL USE**

**STATUS** \_\_\_\_\_

**DATE** \_\_\_\_\_

**OFFICER** \_\_\_\_\_

**LABOUR DEPARTMENT  
NASSAU, BAHAMAS**

**EX-2**

**NOTIFICATION OF VACANCY**

**(TO BE SUBMITTED IN DUPLICATE) PLEASE PRINT**

COMPANY and NAME OF EMPLOYER \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

TELEPHONE: HOME \_\_\_\_\_ BUSINESS \_\_\_\_\_ P. O. BOX \_\_\_\_\_

TYPE OF BUSINESS	OWNERSHIP	HOURS OF WORK	NO. OF EMPLOYEES		DURATION
	<input type="checkbox"/> Government <input type="checkbox"/> Private <input type="checkbox"/> Local <input type="checkbox"/> Foreign <input type="checkbox"/> International		BAH	NONBAH	<input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Permanent
WAGES/SALARY	PAY UNIT	EDUCATION	EXPERIENCE		CERTIFICATE
	<input type="checkbox"/> HOUR <input type="checkbox"/> DAY <input type="checkbox"/> WEEK <input type="checkbox"/> MONTH <input type="checkbox"/> YEAR	<input type="checkbox"/> PRIMARY <input type="checkbox"/> SECONDARY <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> COLLEGE			

JOB TITLE \_\_\_\_\_

DETAILS OF DUTIES \_\_\_\_\_

(1) NAME OF EMPLOYEE \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_  
(ON BEHALF OF WHOM THE APPLICATION IS MADE)

(2) NATIONALITY/COUNTRY OF ORIGIN \_\_\_\_\_

(3) NUMBER OF YEARS RESIDENT IN THE BAHAMAS \_\_\_\_\_

(4A) NEW APPLICANT \_\_\_\_\_ (4B) RENEWAL \_\_\_\_\_

(5) NUMBER OF BAHAMIANS IN TRAINING FOR ABOVE POSITION: \_\_\_\_\_

NAMES \_\_\_\_\_ DATE TRAINING BEGINS \_\_\_\_\_

DURATION OF TRAINING \_\_\_\_\_

(6) LIST ACADEMIC QUALIFICATIONS OR PROFESSIONAL EXPERIENCE (ON BEHALF OF APPLICATION IS MADE:-

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**OFFICIAL USE ONLY**

JOB TITLE \_\_\_\_\_ JOB CODE \_\_\_\_\_

INDUSTRIAL CODE \_\_\_\_\_ RECEIVED BY \_\_\_\_\_ JOB NUMBER \_\_\_\_\_

OFFICER \_\_\_\_\_ DATE \_\_\_\_\_