



PLEASE COMPLETE THIS FORM IN BLUE OR BLACK INK USING BLOCK CAPITALS

Title:	Surname:		
Christian Name:		Middle Name:	
Country of Birth:		Nationality	
Home Address (Street Number, Street Name):			
Home Address (Town/Village/P.O., Parish):			
Home Telephone Number:		Mobile Number:	
1876		1876	
Work Telephone Number:		Fax Number:	
1876		1876	
Email Address:			
Qualification (Please check the applicable level):			
Secondary____	Diploma____	First Degree____	Masters____ PhD____
Have you ever served on a PEI Board?		Yes____	No____
If öyesö, state the name and type of institution _____			
Are you currently serving on a PEI Board?		Yes____	No____
If öyesö, state the name and type of institution _____			
In which parish would you like to serve? _____			
List, in order of preference, three institutions at which you would like to serve.			
1.	_____		
2.	_____		
3.	_____		
In What position would you like to serve?		Nominated Member _____	Chairman _____

KINDLY ATTACH CURRICULUM VITAE
AND
REFERENCE LETTER TO THIS FORM

ATTACH PASSPORT-SIZED PICTURE
HERE

I, _____, declare that the foregoing statements are true, complete and accurate to the best of my knowledge and belief. I understand that any misrepresentation or material omission made on the application form or other document requested by and presented to the National Council on Education renders the application null and void. Therefore, the assignment offered, based on the application, will be terminated. I also agree and understand that submitting this form does not automatically register me as a volunteer of the Board of PEI.

Applicant's Signature: _____

Date: _____

Name of Referee or
Recommending Body: _____
(if applicable)

Referee's Signature: _____

Official Signature: _____

Date: _____

NOTE TO ALL APPLICANTS

Forms are to be returned to the NCE, or at their authorized collection points, along with the following:

- A photograph of the applicant
- A completed Resume along with References
- A recommendation from the Referee

Stamp/Seal of JP/Notary Public or Minister of Religion

FOR OFFICIAL USE ONLY

Form checked by _____

Date: _____

Signature: _____

Application accepted: Yes ___ No ___

Notification Letter sent: Yes ___ No ___

Recommended Position _____

Recommended School: _____

Constituency: _____

Approved by: _____

Date: _____

Signature: _____