GOVERNMENT OF SAINT LUCIA HUMAN RESOURCE PERSONAL DATA CAPTURE FORM

		Staff No
		Hire Date
		NIC #
First Name		Middle Name
Last Name		Maiden Name
Date of Birth.	(mm/dd/yy)	Country of Birth
Sex Marital Status		
Home Address		
District		Tel#
Post		Ministry
Department Section		
Date Appointed to current postAppointment End Date		
Employment Type(Temporary / Permanent)		
Basic Salary / Hourly Rate		
Bank Name		
Bank Address		
Account Num	ber	
Tax Account Number (obtained from Inland Revenue Dept.)		
Education:	ation: (last two [2] qualifications obtained)	
Next of Kin/E	Emergency Contact	
Address		