



FOR OFFICIAL USE ONLY
APPLICATION NO.

MINISTRY OF THE PUBLIC SERVICE, TRANSPORT, INFORMATION AND UTILITIES REGULATION

SUMMER EMPLOYMENT PROGRAMME

APPLICATION FORM

The Summer Employment Programme provides students with opportunities to gain practical working experience, particularly as it relates to their chosen areas of study. Successful students under this programme will receive remuneration which can assist them in defraying the cost of schools supplies.

Instructions:

1. Students are required to complete the application form and submit it to the office of the **Ministry of the Public Service, Transport, Information and Utilities Regulation, 2nd floor, Greaham Louisy Administrative Building, Waterfront, Castries** on or before **May 29** in the calendar year for which summer employment is being sought.
2. Incomplete applications **will not** be considered.
3. The **minimum** age for application is sixteen (16) years. Students should reach the minimum age on or before June 01, in the calendar year in which they apply.
4. The employment period is for **one (1) month: July or August**.
5. Each student is required to submit a copy of their **School ID Card**, an **NIC number** from the National Insurance Corporation and a copy of a **valid National ID Card**.
6. The programme is open to students in Form 5 Secondary Schools, first year of Sir Arthur Lewis Community College and University students who **are not** in their final year. **All other applicants are required to submit proof of registration in a full time programme.**
7. Students must ensure that all information provided on the application form, including mailing address, is accurate.
8. Applications submitted after the deadline of **May 29, 2026 will not** be considered.

PERSONAL DATA

NAME (Ms., Mr., Mrs.) _____

DATE OF BIRTH ____/____/____ (DD/MM/YR) **GENDER** Male Female (please tick)

PERMANENT ADDRESS (where you live) _____

MAILING ADDRESS (where you receive your mail) _____

Contact Number _____ Email Address _____

N.I.C Number _____ (required)

EDUCATION

Programme of study _____
(please indicate specific name of programme being pursued)

LEVEL OF STUDY (please tick)

Postgraduate Undergraduate A'Level Certificate
Graduate Associate Degree Diploma Secondary (Form 5)

Name Of Institution _____

Length Of Programme _____ (e.g. 5 years, 3 years)

Current Year of Enrolment _____ (e.g. 1st year, 2nd year, Form 5)

How is your Education Financed? (tick all that apply)

Government Loan Self
Grant/Scholarship Parent/Spouse Other (please specify) _____

EMPLOYMENT, SKILLS AND CAREER

Is this your first application for summer employment

YES NO

If no, were you employed in the programme before?

YES NO

Please specify skills (e.g. computer literacy, typing, drawing, accounting etc.) _____

Career Aspirations _____

Preferred Agency/Unit for Job Placement (Name of Ministry/Department)

Month available for employment

July

August

No Preference

Reasons for seeking summer employment *(please provide an essay of no more than 100 words, handwritten please)*

I _____ grant approval to my son/daughter/ward _____
(Name of Parent/guardian) *(Applicant's name)*
permission to participate in the Summer Employment Programme. (students under the age of 18 yrs)

I _____ hereby certify that the above information is to the best of my
(Applicant's full name)
knowledge correct and true. I understand that if I give false or misleading information on this form, my application will be automatically rejected. Further, I understand that by submitting this Application Form that the Department of the Public Service reserves the right to verify the information provided to ascertain its accuracy.

Signature of Applicant

Date

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Date Received ____/____/____ *(dd/mm/yr)* **Time** _____

Receiving Officer's Name _____ **Signature** _____

Comments
