**Guidance notes: Applicant Information Form (Part 1)**

Please read these notes carefully **before** completing the application form.

1. Complete all sections of this form (Part 1) and the Applicant Statement Form (Part 2).

2. **Please do not send your CV or resume** as this will not be accepted in place of, or in addition to, completed application forms.

3. This form is used for administration purposes to track your application.

4. Completed application forms for the Project Manager (Kenya) position with Reconciliation Initiatives must be received by **Wednesday 30th April 2025 at 5 pm (EAT).**

5. Send your completed application forms, parts 1 and 2, by email to susan@ekogglobal.com, with the subject: **Project Manager (Kenya) RI Application**. Your Applicant Information Form (Part 1) will need to be submitted as a scanned PDF document showing your signature. Your Applicant Statement Form (Part 2) should be submitted as a Word document.

6. You will receive an email acknowledgement from us when we receive your application. If you have not heard from us within ten working days of sending the application to us, please email riprojectmanagervacancy@gmail.com. After shortlisting has taken place, you will be notified by email of the outcome of your application.

7. Initial screening interviews will take place between Friday 2nd May and Friday 9th May 2025. The main interviews will be held on Wednesday 28th May 2025 unless we let you know otherwise.

8. It is not necessary to provide references at the application stage. We will request references from shortlisted candidates later.

9. If you have questions about the advertised position, please contact susan@ekogglobal.com.

**Applicant Information Form (Part 1)**

Top of Form

|  |  |
| --- | --- |
| Post applied for: | **Project Manager (Kenya), Reconciliation Initiatives** |
| Please tell us how or where you heard about this vacancy:  |  |

Bottom of Form

**1) Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | Title |  |
| Forename(s) |  |
| Name used(if different) |  |
| Address |  |
|  |
|  | Postcode |  |
| Mobile |  |
| Landline |  |
| Email |  |

**2) Declaration**

By my signature on this application, I hereby certify that the information that I have given to you on this form is correct to the best of my knowledge. I agree that the information on this form may be used for registered purposes and storage under the Data Protection Act 1998.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |