

# **ROYAL ST.LUCIA POLICE FORCE**

## **APPLICATION REQUIREMENTS**

1. **CITIZEN**

ALL CANDIDATES MUST BE A CITIZEN OF SAINT LUCIA

2. **AGE**

Candidates must be at least 18 years and not older than 35 years of age.

3. **ATTAINMENT**

All interested candidates should possess at least (5) CXC General 1, 2, 3 or Basic 1. English is compulsory, five (5) GCE, O'Levels, or equivalent.

4. **CHARACTER**

All candidates must be law abiding citizens and have a **high standard of personal behavior and social conduct.**

5. **HEALTH AND FITNESS**

Candidates must be physically fit and healthy and complete all elements of the fitness and medical exams.

**ONLY QUALIFIED APPLICANTS WILL BE ACKNOWLEDGED**

**PLEASE INCLUDE: CERTIFIED COPIES OF**

1. **BIRTH CERTIFICATE**
2. **CXC CERTIFICATE/SLIP**
3. **ANY OTHER CERTIFICATES**
4. **PASSPORT SIZED PICTURE – ONE**



**ROYAL ST. LUCIA POLICE FORCE**  
**APPLICATION FORM FOR APPOINTMENT**  
**AS POLICE CONSTABLE**

***Please read this note carefully before completing the form***

You must complete this form yourself and as fully and accurately as possible. The information provided will be assessed and will help to determine whether you have the necessary potential to progress to the next stage of the recruitment process.

Applications should be completed in **BLACK INK** using **BLOCK LETTERS** on pages **1 - 5**. You must use your normal handwriting on pages **6 - 10**.

Surname: _____	Forename(s): _____
Title: _____ (e.g. Mr/Mrs/Miss)	Date of birth: _____ (month/day/year)
Contact Address: _____	
Telephone no. : (home) _____	Work no: _____ Cellular: _____
Nationality: _____	Age: years _____ months _____
<b>TO BE ELIGIBLE FOR APPOINTMENT YOU MUST BE A ST. LUCIAN CITIZEN</b>	

On completion please return to:

**The Officer in Charge  
Police Training School  
La Toc Road  
Castries**

**or**

**Human Resource Department  
Police Headquarters  
Bridge Street  
Castries**

## Section (1)

## Personal Details

### **Applicant**

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_

Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

NIS No: \_\_\_\_\_ Present Occupation: \_\_\_\_\_

Present Address: \_\_\_\_\_

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### **Previous Addresses (state approximate dates):**

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Are you married? Yes  No

### **Parents/Guardian**

1. Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_

Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_

NIS No. \_\_\_\_\_ Address: \_\_\_\_\_

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2. Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_

Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_

NIS No. \_\_\_\_\_ Address: \_\_\_\_\_

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## **Spouse**

Surname: \_\_\_\_\_ Forenames: \_\_\_\_\_  
Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_  
NIS No.: \_\_\_\_\_ Address: \_\_\_\_\_

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## **Other Members of Household**

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_  
Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_  
NIS No. \_\_\_\_\_ Relationship: \_\_\_\_\_  
(e.g. sister, cousin)

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_  
Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_  
NIS No. \_\_\_\_\_ Relationship: \_\_\_\_\_  
(e.g. sister, cousin)

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_  
Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_  
NIS No. \_\_\_\_\_ Relationship: \_\_\_\_\_  
(e.g. sister, cousin)

Surname: \_\_\_\_\_ Forename(s): \_\_\_\_\_  
Previous Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
Date of Marriage: \_\_\_\_\_ Occupation: \_\_\_\_\_  
NIS No. \_\_\_\_\_ Relationship: \_\_\_\_\_  
(e.g. sister, cousin)

## Section (2) Education

You are required to produce education certificates along with your application form. If you are still in, or have recently left, full-time education, a reference from the place concerned is also required.

Please enter details of your education from the age of 12 years.

Name and Address of School/College/University	Attendance		
	From	To	Full or Part-time

Please list all examinations passed.

Examination CXC, GCE, Cert., Dip., Degree etc.	Grade	Date Passed

## Section (3) Employment History

Details of Present (or most recent) Employment (or School/College etc.) if leaving full-time education	
<b>Employers name</b>	
<b>Address</b>	
<b>Position held &amp; Main Duties</b>	
<b>Reason(s) for wanting to leave</b>	

Previous Employment				
Name & Address of Employer	Position held & Main Duties	Date		Reason for Leaving
		Started	Left	

**Section (4) Voluntary/Community Work**

<i>Please list any voluntary/community work you have performed (e.g. youth/community group)</i>		
	<u>Date</u>	<u>Position</u>

**Section (5) Health**

**Please note:** Prior to acceptance you may be requested to answer further questions relating to your medical history and will be required to pass a medical examination and physical test.

To be eligible for appointment applicants must be in good health	
(a)	Do you have any medical condition which might affect you performance as a police officer Yes <input type="checkbox"/> No <input type="checkbox"/>
If <i>yes</i> or <i>unsure</i> give details on the continuation pages.	
(b)	Do you wear spectacles or contact lenses?    Yes <input type="checkbox"/> No <input type="checkbox"/>
Applicants should have unaided vision of not less than 6/18 in each eye (Snellen's Test); the distance vision should be correctable with approved vision aids to a standard of 6/6 in one eye, 6/12 in the other eye, and 6/6 binocularly. The test for near vision with aids should be in accordance with the standards set by the Chief Medical Officer.	

Section (6)

Additional Information

(A)

Have you ever been charged with or summoned for any offence or had an order made against you by any court.

Yes

No

If yes, give particulars.

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Do you have a Driver's License

Yes

No

Are you able to swim

Yes

No

Give details of sports or games in which you take part.

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(B)

Please give reasons why you wish to join the Police Force.

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*(Continue on separate page if required)*

BEFORE COMPLETING THIS SECTION, PLEASE READ THE PERSON SPECIFICATION. THE DETAILS IN THIS SECTION WILL BE ASSESSED TO DETERMINE WHETHER YOU WILL BE INVITED TO CONTINUE IN THE SELECTION PROCESS.

- (C) **Explain how you would relate your education/training/experience in paid work or other activities to the selection criteria described. Please ensure that you provide examples for each skill as listed below.**

<b>Criteria</b>	<b>Examples/Evidence</b>
<b>Professional and ethical standards, awareness of social issues</b>	
<b>Communication Skills</b>	

*(continue each criterion on a separate page if required)*

<b><i>Criteria</i></b>	<b><i>Examples/Evidence</i></b>
<b>Communication Skills</b>	
<b>Decision Making</b>	

*(continue each criterion on separate page if required)*

<b><i>Criteria</i></b>	<b><i>Examples/Evidence</i></b>
<b>Creativity and Innovation</b>	
	<b>Ability to portray a positive image of the Force</b>

*(continue each criterion on separate page if required)*

*Section (7) Recommendation*

Give here the names and addresses of three persons **NOT RELATIVES OR SERVING POLICE OFFICERS**, who have known you for not less than five (5) years and who are prepared to recommend your application and vouch for your character.

<b>Names of Persons Recommended</b>	<b>Address &amp; Contact Telephone #</b>	<b>Occupation</b>	<b>Period Knowing Candidate (years)</b>

*Section (8) Declaration*

**I declare that all the information contained in this application is correct to the best of my knowledge and belief and that no relevant information has been willfully withheld. I understand that any misrepresentation will invalidate my application and, if employed, will constitute a breach of Police Misconduct Regulations and render me liable to disciplinary action.**

<b>Signed:</b> _____ <b>Date:</b> _____
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