

Poultry Excellence Trainee

APPLICATION FORM: POULTRY EXCELLENCE TRAINEE
CLOSING DATE FOR APPLICATIONS: 8 NOVEMBER 2024

Passport Photo



Please email your application and supporting documents to:
roots@namibmills.com.na

If you have not received feedback or correspondence relating to this application by 31 January 2025, you can assume that your application has been unsuccessful.

SECTION A – APPLICATION DETAILS (Please complete clearly)

1. Application for:

Poultry Excellence Programme

SECTION B – PERSONAL PARTICULARS

First Name(s): _____ Surname: _____

Postal Address (at home): _____

Contact Number(s): _____ Email Address: _____

Citizenship: _____ Date of birth: _____

ID or Passport Number: _____ Gender: _____

Marital status: _____ Home Language: _____

State of health: _____

Particulars of parent / guardian (please indicate the relationship):

Surname: _____ First Name(s): _____

Residential Address: _____ Postal Address: _____

Contact Number(s): _____ Email Address: _____

Occupation of parent / guardian: _____

Name and address of employer: _____

Number of dependents of yourself / your parents or guardian:

| Name and Surname: | Age: |
|-------------------|------|
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SECTION C: CAREER AND EDUCATION

1. Career Ambitions

1.1 State the career you wish to follow / What are your future plans?

2. Educational Qualifications

2.1 Grade 12 Subjects passed (State year in which passed and submit written proof):

3. What have you been doing since you left school?

| Year: | Details: |
|-------|----------|
| | |
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4. Tell us about yourself (any information not given in previous questions):

5. Parent Employment (if applicable):

5.1 Name and Surname: _____

5.2 Personnel number: _____

5.3 Company the parent works at (E.g. Feedmaster): _____

5.4 Department the Parent works in: _____

5.5 Contact number of Parent: _____

6. Compulsory documents to accompany your application

- 6.1 Certified copies of your Grade Twelve (12) certificate and/or academic record;
- 6.2 One attached passport photograph;
- 6.3 Certified copy of at least one (1) testimonial;
- 6.4 Certified copy of birth certificate / passport / ID;
- 6.5 Applicants motivation letter;
- 6.6 Comprehensive CV;
- 6.7 Certified copy of driver's license.

Please do not attach original academic record.

FAILURE TO COMPLETE THE APPLICATION FORM TRUTHFULLY, MAY LEAD TO AN UNSUCCESSFUL APPLICATION



UNDERTAKING

I (Full name and surname in capital letters), _____

Of (Address)

Certify that the information supplied by me in the sections above are true, complete and correct to the best of my knowledge.

Signature of Applicant: _____

Date: _____

PLEASE NOTE: INCOMPLETE APPLICATION FORMS WILL NOT BE PROCESSED.

