



SOLOMON ISLANDS ELECTORAL COMMISSION
 NATIONAL STADIUM BUILDING,
 NHA FOOD COURT BUILDING, KING GEORGE VI DRIVE
 PO BOX 1500, HONIARA,
 SOLOMON ISLANDS



Phone: (677) – 21199 | (677) 7222200

Website: www.siec.gov.sb

Email : info@siec.gov.sb

POLLING OFFICIALS APPLICATION FORM

<p>Completed applications should be returned to:</p> <p>1. Solomon Islands Electoral Office at the National Stadium, Food Court Building, King George VI Drive, Honiara</p>	<p>Women, men and anyone who believes they can do the work and meet the minimum criteria are encouraged to apply</p>
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A. POSITIONS APPLIED FOR.														
<p>In which polling station are you interested in working? <small>(Check with the electoral office for Ward & Stations List – polling stations may change)</small></p>	<p>Constituency: <i>Fataleka Constituency</i></p> <p>Ward: <i>West Baegu/Fataleka</i></p> <p>Area / PS 1.</p> <p>Area / PS 2.</p> <p>Area / PS 3.</p>													
<p>Position applied for- maximum 3 (Please list in order of preference – 1 being highest; 3 being last choice)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Positions</th> <th style="width: 40%;">Vacancy Reference No</th> </tr> </thead> <tbody> <tr> <td><i>Presiding Officer</i></td> <td><i>SIEO/04/26</i></td> </tr> <tr> <td><i>PA Voter Verifier & Ballot Box Guide</i></td> <td><i>SIEO/05/26</i></td> </tr> <tr> <td><i>Polling Assistant Ballot Paper Issuer</i></td> <td><i>SIEO/06/26</i></td> </tr> <tr> <td><i>Queue Controller</i></td> <td><i>SIEO/07/26</i></td> </tr> <tr> <td><i>Counting Officer</i></td> <td><i>SIEO/08/26</i></td> </tr> </tbody> </table>	Positions	Vacancy Reference No	<i>Presiding Officer</i>	<i>SIEO/04/26</i>	<i>PA Voter Verifier & Ballot Box Guide</i>	<i>SIEO/05/26</i>	<i>Polling Assistant Ballot Paper Issuer</i>	<i>SIEO/06/26</i>	<i>Queue Controller</i>	<i>SIEO/07/26</i>	<i>Counting Officer</i>	<i>SIEO/08/26</i>	
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<p>Instructions – You are required to respond to every section on the application form which also includes CV information. Failure to complete this form can disqualify your application from further consideration. Complete applications, and relevant documents should be submitted to your Provincial/ HCC Election Administration Office.</p>														
B. PERSONAL DETAILS														
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms													
First Name:														
Middle Names:														
Surname:														
Male/ Female (Please tick)	<input type="checkbox"/> Male <input type="checkbox"/> Female													
Date of Birth:	_____//_____//_____ (dd/mm/yyyy)													
Place of Birth														
Religion (Denomination)														
Village / Place of Origin														

Province, Constituency, & Ward of Origin																				
Postal Address																				
Current Place of Residence (Where are you currently living)	Village or Area																			
	Constituency / Ward																			
	Province																			
C. CONTACT DETAILS																				
Phone / Mobile Number																				
Back-up Mobile Number																				
Email Address																				
D. OTHER RELEVANT INFORMATION																				
Voter Registration ID Number:																				
Do you suffer from a disability, chronic illness, allergies, or health issues? E.g. Sugar or high blood pressure issues? Seeing issues? Hearing issues? gout? mobility issues?	<input type="checkbox"/> Yes <input type="checkbox"/> No - If yes please explain																			
Are you mentally and medically fit to fully mobilise, support, and complete your selected role/s as required by your supervisor (possibly more than 10 hrs in a day)	Some polling positions are physically challenging, please tick yes/no to the following:																			
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Are you presently employed	<input type="checkbox"/> Yes <input type="checkbox"/> No - If yes please state your occupation and employer																			
E. ELECTION EXPERIENCE																				
Have you worked or engaged as a Polling Official in the past National General Election, Provincial Assembly, Honiara City Council Elections or any by-Elections? (Please tick, if yes complete table)	<input type="checkbox"/> Yes <input type="checkbox"/> No																			
	Year	Constituency																		
		Position (full name of position)																		
Have you ever had any experience (including volunteer or community work) that might help you in working for the Solomon Islands Electoral Commission?																				

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Have police charges ever been raised against you?		<input type="checkbox"/> Yes <input type="checkbox"/> No - If yes please explain	
F. EDUCATIONAL LEVEL			
Please select your highest level of education			
<input type="checkbox"/> Informal Education	<input type="checkbox"/> Primary School	<input type="checkbox"/> Form-1-3	<input type="checkbox"/> Form 4-6
<input type="checkbox"/> Form 7	<input type="checkbox"/> Vocational	<input type="checkbox"/> Certificate	<input type="checkbox"/> Diploma
<input type="checkbox"/> Degree / higher	<input type="checkbox"/> Masters / higher		
G. DISCLOSURE FOR CONFLICT OF INTEREST			
I declare that I am related to but not influenced by a family member of:			
<input type="checkbox"/> SIEO or SIEC Staff Member	<input type="checkbox"/> Party Official	<input type="checkbox"/> Member of Parliament	
<input type="checkbox"/> Provincial Assembly Member	<input type="checkbox"/> Intending Candidate	<input type="checkbox"/> Temporary Election Officers	
<input type="checkbox"/> HCC Councilors	<input type="checkbox"/> None		
Have you been an office bearer of a political party or any entity or group with political aims during the last 5 years		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently providing any Service or conducting any business with the Solomon Islands Electoral Office in terms of procurement and supply chain management requirements?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you have answered yes to any question in the section please give details			
H. REFEREE CONTACT DETAILS			
REFEREE 1		REFEREE 2	
Name:		Name:	
Title:		Title:	
Organization:		Organization:	
Address:		Address:	

<i>West Baegu/Fataleka Ward</i>		<i>By-Election</i>		<i>Polling Officers</i>	
Phone		Phone			
Email:		Email:			

I. DECLARATION	
<p>I hereby declare that all information in this application form is true, complete, and correct to the best of my knowledge and belief, and I have in no way misled the selection team,</p>	
<p>Signature: _____</p>	
<p>(Type name if submitting Electronically)</p>	
<p>Date: _____</p>	

Tick the box to confirm required documents to make your application complete are attached in the following order:

- Highest level education certificate
- Curriculum Vitae (CV)
- 2 written references not more than 12 months old