Department of Employment
HM Government of Gibraltar

EMPLOYMENT ACT
EMPLOYMENT REGULATIONS, 1994

NOTIFICATION OF VACANCY

SUBMIT BOTH COPIES TO THE DEPARTMENT OF EMPLOYMENT

THE DEPARTMENT OF EMPLOYMENT IS COMMITTED TO A POLICY OF EQUAL OPPORTUNITIES FOR ALL ITS USERS AND TO ACTING IN ACCORDANCE WITH THE EQUAL OPPORTUNITIES ACT, 2006

ALL SECTIONS OF THE FORM MUST BE COMPLETED

1. Employer Registration No.: | | | | | |

As issued under Business Trades and Professions (Registration) Act 1989

Employer's Name: _____

Telephone No.: _____ Fax No.: _____

2. Job Title: _____ Please insert number of vacancies to be registered under this Notification _____

3. Starting Date: _____
(Shall not be earlier than 2 weeks after the date on which notification is registered)

4. Necessary Qualifications and Experience: _____

_____

_____

_____

5. Hours of work: _____ 6. Salary/Wage: _____

7. Location of Employment: _____

8. Other Benefits: _____

9. Name of Person making Notification: _____

Position in Organisation: _____ Signature: _____

10. Date on which Notification was Registered _____

A NOTIFICATION OF VACANCY IS ONLY VALID FOR A PERIOD OF THREE MONTHS FROM THE DATE ON WHICH THE NOTIFICATION IS REGISTERED

FOR OFFICE USE ONLY:

VC	FT	PT	TMP

ACCEPTED BY	DATE	INPUT BY	DATE	C/CHECKED BY	DATE

Vacancy No.: _____

Vacancy Date: _____

Receiving Officer Initials: _____

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