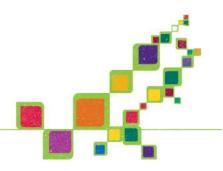


Application Form – Antigua

Please complete this form and return via email along with a copy of your university transcript to balynda.barnes@ag.gt.com

Position Applied For:					
Professional Qualific	ation: (ACCA, CPA etc)				
Personal Detail First Name:	s	Surname	e:		
Home Address:					
Home Telephone:		Mobile Number:			
Email Address:					
Date of Birth:		Country	of Birth:		
Nationality:		Work Permit Required:			
Current Driver's Lice	nse:				
Higher Education University	On Course Title	Subjects Covered	Grades	Year	
What is your GPA?		In which year did you university?	ı graduate or do	you expect to graduate from	



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Professional Certification

University/Institute/Certifying Body

Year Awarded

Employment History

Start & End Dates

Name & Address of Employer

Job Title

Brief description of Responsibilities

Career Choice

What do you think a role within your chosen position/line of service will involve

Tell us what steps you have taken to advance in your career choice.



Please outline your main interest, including any positions of responsibility held, scholarships, awards and prize
At University/Other
Motivation, Initiative, Teamwork Describe a recent situation where you have demonstrated motivation and initiative:
Describe a recent situation where you have demonstrated teamwork:
Additional Information Residence Abroad/Significant Travel
Foreign Language Skills
IT Literacy – please describe your level of experience using computers, giving examples of programs and packages used
Physical Record: Current state of health: Excellent / Good / Poor Please provide any comments which may be relevant

Please provide details of any physical handicaps, disabilities, serious illness or other conditions which may affect your ability to perform the duties of the position applied



Client Service and Office Hours

Our professional clients include organizations in the Financial Sector, Tourism & Hotel Industry, Real Estate, Retail and Distribution (including the distribution of alcohol and cigarettes), Telecommunication industry, Airline industry, Gaming and various non-profit organizations. Grant Thornton expects all its employees to offer professional services to all of the firm's clients and to fully participate in all services offered by the organization to its clients. Please indicate if you are unable to work on assignments in the industry sectors listed above.

Our office hours are 8:00am to 4:30pm Monday to Friday. However, due to the nature of the work in a professional office, it will be necessary to work beyond 4:30pm and on days off from time to time. Please indicate whether you will be unable to work overtime on any days of the week, including Saturdays and Sundays.

Personal References								
Name:								
Address:								
Telephone:								
Email:								
Occupation								
Name:								
Address:								
Telephone:								
Email:								
Occupation								
Name:								
Address:								
Telephone:								
Email:								
Occupation								
I confirm that the information I have provided in this document accurately and completely represents my professional and personal background.								
I authorise you to make such investigations and inquires of my personal, employment, and financial history as may be necessary in arriving at an employment decision.								
In the event of my employment with Grant Thornton I understand that false or misleading information given in my application or interview(s) may result in the termination of my employment. I understand also, that I am required to abide by all rules and regulations of the firm.								
Sign: Date:								