



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.: _____

Please insert number
of vacancies to be
registered under this
Notification _____

2. Job Title: _____

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: _____

EACH REGISTERED VACANCY CARRIES A FEE.

See Fees Table at www.gibraltar.gov.gi/departement-employment/fees

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

FOR OFFICE USE ONLY:

INPUT BY	DATE

Vacancy No.: _____

Date on which Notification was Registered: ____/____/____