



**PUBLIC SERVICE OF PAPUA NEW GUINEA  
PERSONNEL DETAILS OF UNATTACHED/EXCESS OFFICERS**

DEPARTMENT:		DIVISION:		BRANCH:		PRESENT LOCATION:	
LAST NAME	FIRST NAME	DATE OF BIRTH	SEX	MARITAL STATUS	NO. OF DEPENDANTS	HOME PROVINCE	VILLAGE/DISTRICT
DATE JOINED DEPT./PUB SER	DATE OF PERMANANCY	DATE JOINED POST	POSITION TITLE	CLASSIFICATION	ACTING POSITION/GRADE	DATE WHEN MADE UNATTACHED	REPATRIATION REQUIREMENTS MODE OF TRANSPORT
DUTIES BEING PERFORMED			EMPLOYMENT HISTORY			QUALIFICATION AND TRAINING	
KNOWLEDGE:			ATTITUDE TO WORK:			ATTENDANCE:	

COMMENTS: (e.g. Reason for being redundant i.e.: position abolished, downgraded, low productivity)

I certify that the above officer is an unattached/excess Officer within my Department

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Date

Secretary/Head of Agency

RMC DECISION	NOTICE PERIOD	TERMINATION DATE	DATE NOTICE SERVED
APPROVED/NOT APPROVED			
DATE:			
DATE DEED OF RELEASE SIGNED:		DATE CHEQUE COLLECTED/SIGNED:	

Verified by: .....

Date: .....