| For Official Use Only Date Received: | |
|--------------------------------------|--|
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Justice of the Peace Appointment Renewal Form

| | | T | |
|--|---------------|----------------------|--------|
| PART A: Personal Details | | | |
| Full Name: | | | |
| Date of Birth: | Gender: | Male | Female |
| Postal Address: | | Residential Address: | |
| | | | |
| | | | |
| Telephone Contact: | | Mobile Contact: | |
| Email: | | TIN No: | |
| Driving Licence No: | | Passport No: | |
| Name of Next of Kin: | | | |
| Relationship to you: | | | |
| Address: | | | |
| Contact: | | | |
| Are you a Fiji Citizen? | Yes | ☐ No | |
| If Not, how long have you resided in | n Fiji? | | |
| What languages do you speak? | | | |
| What level of education have you a (List your academic qualifications and provide or | ttained: | tes awarded to vou) | |
| (Liot your academic quamications and promes | | | |
| | | | |
| | | | |
| Any other official appointment; plea | se provide de | etails: | |
| | | | |
| | | | |

| If Yes, please indicate the year the application was lodged: | | | | | |
|---|---|----------|----|--|--|
| Reason for seeking re-appointment: | | | | | |
| | | | | | |
| | | | | | |
| PART B: Employment Details | | | | | |
| Present Occupation: | | | | | |
| Employer's Name (or state if self-employe | ed): | | | | |
| Work Address: | | | | | |
| Telephone: | | | | | |
| Length of Service: | | | | | |
| Previous Employer's Name: | | | | | |
| Position Held & Length of Service: | | | | | |
| PART C: Statements of Personal Chara (If your answer is Yes to any of the questions in Pa | cter art C, please provide all relevant details on a separate sh | eet) | | | |
| Have you ever been convicted of a crime removed from official record) since your a | or offence (including a conviction which is now ppointment as a Justice of the Peace? | Yes | No | | |
| Have you ever been charged with any offe | Yes | No | | | |
| Have you ever been declared bankrupt? | | | No | | |
| Is there a pending investigation by FICAC, Police, FRCA or any other statutory authority against you? | | | No | | |
| PART D: Details of Report Submitted | | | | | |
| | First Half Sec | ond Half | | | |
| Year 1: | Data. | | | | |
| | Date | Date | | | |
| Year 2: | Date | Date | | | |
| Year 3: | | | | | |
| | Date | Date | | | |
| | | | | | |
| | | | | | |

DECLARATION: To be completed by all Applicants

(Photo ID must be sighted)

| as a Justice of the Peace in Fiji and I am willing, if re-appointed, to undertake all duties attached and abide by the law and rules as they relate to the role of the Justice of the Peace. |
|---|
| I give my consent to the Minister for Justice and his/her employees to conduct a criminal history check on me and make confidential inquiries as to my character and suitability for appointment as considered necessary. |
| I declare that I have the ability to carry out all the functions of a JP. |
| I declare that i will abide by the Code of Conduct of JPs. |
| I hereby declare that the statements made in this application are true and correct in every manner. |
| Declared at this day of |
| Signature of Applicant: |
| Witnessed by:(Commissioner for Oaths) |

MINISTRY OF JUSTICE Level 1, Suvavou House P. O. Box 11869, Suva Phone: 3308600

Phone: 3308600 Fax: 3303676