Portfolio of the Civil Service
Cayman Islands Government

Second Chances Application Form

Personal Information

Full Name: _____

Date of Birth: (DD/MM/YY): _____ Male ◯ Female ◯

Email: _____ Cell Number: _____

Physical Address: _____

Are you seeking Full-time ☐ Part-Time ☐ Are you willing to work shifts YES ☐ NO ☐

Any matters currently before the court? YES ☐ NO ☐ Date of Release/ Released: ____

Conditional Release License: _____ Date CRL Commence: _____ Date CLR Expires: _____

Transportation

Do you have a valid driver's license? YES ◯ NO ◯ Do you have access to transportation? YES ◯ NO ◯

If NO, do you have alternative means of transportation? No ☐ Access through another ☐ Bicycle ☐

Which areas can you get to, using this form of transportation? West Bay ☐ Seven Mile Beach ☐ George Town ☐
Prospect ☐ Bodden Town ☐ North Side ☐ East End ☐

Barriers

Any known barriers to employment? Childcare ☐ Transportation ☐ Healthcare ☐ Housing ☐

Are there any physical barriers to work placement (can stand/lift/bend/walk/stoop)? YES ☐ NO ☐

Employment

Last Position: _____ Company: _____

Start Date: _____ End Date: _____

Duties included: _____

_____

Work Experience and Interest

What areas do you have experience in? (Admin, Finance, Sales, Hospitality, Construction, Beauty) Include the number of years' experience.

1. _____ 2. _____ 3. _____

What skills do you have? (e.g. punctual, teamwork, computer skills, languages)

1. _____ 2. _____ 3. _____

What jobs would you be interested in?

1. _____ 2. _____ 3. _____

Education

Level of Education:_____ Graduated: YES ☐ NO ☐ Date:_____

Professional Certifications:_____ Graduated: YES ☐ NO ☐ Date: _____

TVET Training Completed:_____ Date: _____

Select me

Why should I be considered for the Second Chances Programme:

_____

_____

Character Reference

Name of reference 1: _____ Name of reference 2: _____

Contact Information: _____ Contact Information: _____

I certify that the information provided on this form is true and accurate to the best of my knowledge and understand that the provision of or falsification of any information or documentation may impact my registration and be subject to penalties as provided for under relevant legislation. I understand my application will be subject to vetting processes.

I have read and understand the above ☐ Yes ☐ No

Name:_____ Date: _____

☐ Application supported by Probation Officer: Name _____

Attach copies of documentation. ☐ 2 Character References attached

☐ Photo ID **or** ☐ Voters ID **or** ☐ Passport **and** ☐ Resume **and** ☐ Birth Certificate ☐ Police Record

☐ Caymanian Status Certificate or copy of stamp in a valid passport showing the same

☐ Residency w/ Employment Rights Certificate or stamp in valid passport

Privacy Notice: the personal data collected on this form is used to facilitate the CIG Second Chances Programme. It will only be processed in accordance with the Data Protection Act (2021 Revision). For more information regarding the processing of your personal data, please contact the Program Administrator.