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OCH Application Form

Position: **Pharmacist (BPharm) / Pharmacist Incharge**

Location: UMN-MDT Okhaldhunga Community Hospital

# Personal Information

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| --- | --- | --- | --- | --- | --- |
| Name |  | | | Gender |  |
| Date of birth (AD) (dd/mm/yyyy) |  | Age |  | Marital status |  |
| Nationality |  | | | Permanent address |  |
| Email address |  | | | Postal address (if different) |  |
| Mobile number (if appropriate) |  | | | Telephone |  |
| Disability (If applicable) |  | | | If yes, which disability ID card has (Blue, Yellow, White) |  |
| If you need help/accommodation for your disability during assessment, please state how we can do this | | | |  | |

# Qualifications

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Level | Subject | Institution | Date | Results |
| E.g. BA | E.g. Business Studies | E.g. Kathmandu University | E.g. 2003-2006 | E.g. 1st division |
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# Work Experience

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Employer & Location |  | Start Date |  | | End Date |  |
| Job Title |  | Reason for Leaving | |  | | |
| Major Responsibilities | | | | | | |
|  | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Employer & Location |  | Start Date |  | | End Date |  |
| Job Title |  | Reason for Leaving | |  | | |
| Major Responsibilities | | | | | | |
|  | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Employer & Location |  | Start Date |  | | End Date |  |
| Job Title |  | Reason for Leaving | |  | | |
| Major Responsibilities | | | | | | |
|  | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Employer & Location |  | Start Date |  | | End Date |  |
| Job Title |  | Reason for Leaving | |  | | |
| Major Responsibilities | | | | | | |
|  | | | | | | |

# Job Specific Questions

(We strongly encourage you to use your own opinion and words while answering the questions. If your answers are from some other source, please provide the reference)

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| --- | --- |
| 4.1 | What do you understand by Unit Drug dose Delivery System? |
|  | |
| 4.2 | How do you follow the rational use of drug through hospital pharmacy? |
|  | |
| 4.3 | How do you monitor medication error in inpatient and outpatient, please write your own view? |
|  | |
| 4.4 | In your opinion, what are the challenges and opportunities in hospital pharmacy? |
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# UMN General Questions

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| --- | --- | --- | --- | --- |
| 5.1 | Describe a time when you have improved and changed something for the better. | | | |
|  | | | | |
| 5.2 | In your current (or most recent) job, how did you share information, skills & knowledge with others? | | | |
|  | | | | |
| 5.3 | Describe a time when you have shown great flexibility in your job and describe the effect you had. | | | |
|  | | | | |
| 5.4 | UMN is a Christian development organisation. Hence Okhaldhunga Community Hospital (OCH) being a faith-based organization has its unique ethics. What do you understand by this, and why are you attracted to working with this organisation? | | | |
|  | | | | |
| 5.5 | Give a specific example from your past work/life of how you have actively worked to promote gender justice. | | | |
|  | | | | |
| 5.6 | Choose 2 of the 6 UMN OCH values that you feel to be most important; for each describe a time when you acted in accordance with that value in the workplace. | | | |
|  | UMN values: | | * Integrity and Honesty * Love and service * Equity and social justice | * Innovation and creativity * Special concern for poor and marginalised people * Care for the environment |
| Value Example 1: | |  | | |
| Value Example 2: | |  | | |

# Language Skills

|  |  |  |  |
| --- | --- | --- | --- |
| Language | | Level of spoken competence | Level of written competence |
|  | | (e.g. basic, intermediate, fluent) | (e.g. basic, intermediate, advanced) |
| Nepali | |  |  |
| English | |  |  |
| Other |  |  |  |
|  |  |  |  |
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# Computer Skills

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| --- | --- |
| 7.1 | Please describe your level of computer literacy, stating applications of which you are a competent user. |
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# Other Relevant Training/Information

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| --- | --- |
| 8.1 | Please detail other relevant training or information which you feel may support your application. |
|  | |
| 8.2 | Have you ever been convicted of any criminal offences? |
|  | |
| 8.3 | Please state monthly salary of your present job or most recent job (according to specification under 3). |
|  | |
| 8.4 | Please state how soon would you be able to start working for OCH if you were offered the post? |
|  | |

# Location Mobility

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| --- | --- |
| 9.1 | This job is based in Okhaldhunga Community Hospital, Okhaldhunga, where the job holder is expected to live. Is this OK with you? |
|  | |
| 9.2 | Please note below any constraints we should be aware of. |
|  | |

# References

Please provide the names of 2 professional people to give references, one of which must be your current work supervisor/employer. UMN will not approach these referees before informing you.

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Job Title | Organisation | Contact Information |
|  |  |  | (include postal address, email address & phone number if possible) |
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|  |  |  |  |

# Signatures

(If you email the form, please add your electronic signature. If you don’t have an electronic signature, you can leave this blank)

|  |  |
| --- | --- |
| Signature |  |
| Date |  |
| How/Where did you learn about this vacancy? |  |