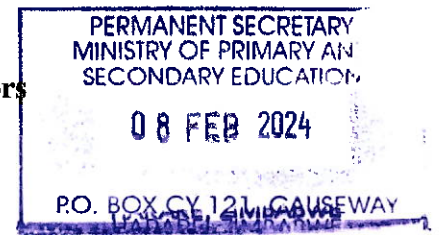


## SECRETARY'S OFFICE

# Memo

**To :** All the Chief Directors  
All the Provincial Education Directors  
All the Heads of Department

**From :** Permanent Secretary  
M Mhike.....



**Date :** 07 February 2024

### **SUBMISSION OF ANNEXURE "A" TO HUMAN RESOURCES DEPARTMENT BY 28 FEBRUARY 2024**

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Reference is made to the Public Service Commission minute Ref: B/214 dated 16 January 2024 on the operationalisation of the Human Resources Management Information System (HRMIS) in Line Ministries, Government Departments and Agencies (MDAs).

It is noted that the Human Resources personnel in the Ministry were capacitated to use the HRMIS (SAP) platform. Through the minute referenced above, the Public Service Commission is now mandating all Line Ministries to fully utilise the system with effect from 01 February 2024.

In view of the above, you are therefore advised to ensure that every staff member in the Ministry fills in Annexure "A" (*copy attached*) and submit to the Head of Office (**Head of School/ District Schools Inspector/ Provincial Education Director/ Chief Director**) for onward submission to Human Resources Department for uploading and ensuring successful implementation and operationalization of the Human Resources Management Information System (SAP).

**STAFF PARTICULARS AND CONTACT DETAILS: ANNEXURE 'A'**

**Details of Member**

Surname:	Maiden Name:
First Name:	ID No:
<b>Gender</b>	Race:
EC Number:	Grade:
Date of Birth:	Birth Place:
Country of Birth:	Province of Birth:
Any Disability:	Type of Disability:
Degree of Disability:	
Date Joined Government:	Email Address:
Ministry/Secretariat:	
Agency/Department:	
Position Held:	Date to Position:
Contract Type:	

**Educational Qualifications**

Name of Institution:  
Qualifications:  
Date commenced:  
Proficiency: e.g. 2;1 / pass

Name of Institution:  
Qualifications:  
Date commenced:  
Proficiency:

Name of Institution: .....  
Qualifications: .....  
Date commenced: .....  
Proficiency: .....

**Please attach current CV and copies of certificates**

**Previous Employment**

Employer 1: Position Held:

Period:

Employer 2: Position Held:

Employer 3: Position Held:

Period:

**If employers are more than 3, please attach an additional sheet**

**Residential and Postal Address**

Residence: Postal Address:

Town/City: Telephone: Mobile:

**Details of spouse**

Full Names:

Residential Address

Postal Address:

Date of Birth: Telephone: Mobile:

**Contact Details for Next of Kin**

The next of kin should ideally reside in the same town as the member

1. Full Names: Postal Address

Residential Address:

Date of Birth  Sex

Telephone:  Mobile:

2. Full Names:

Residential Address: Postal Address:

Date of Birth  Sex

Telephone: Mobile:

### Details for Children

1. Full Names:	4. Full Names.....
Date of Birth <input type="text"/> Sex <input type="checkbox"/>	Date of Birth <input type="text"/> Sex <input type="checkbox"/>
2. Full Names:	5. Full Names.....
Date of Birth <input type="text"/> Sex <input type="checkbox"/>	Date of Birth <input type="text"/> Sex <input type="checkbox"/>
3. Full Names:	6. Full Names.....
Date of Birth <input type="text"/> Sex <input type="checkbox"/>	Date of Birth <input type="text"/> Sex <input type="checkbox"/>

**NB If children are more than six, please attach an additional paper**

### Declaration

I am aware that I should complete another form to update my details within a reasonable time in the event of any change in the information entered herein. Nonetheless, any changes will be updated in less than a month of the changes. I hereby declare that the information given herein is correct and up to date.

Signed.....	.....	.....	.....
<b>Member</b>	<b>Date</b>	<b>Supervisor</b>	<b>Date</b>

**NB: May you please type and supply the following information and attach to the Annexure 'A' Personal Details form. May you please attach copies of all the certificates.**

1. Academic Qualifications  
'O' Level subjects (List all the passed subjects)  
'A' Level subjects (List all the passed subjects)
2. Certificate/Diploma Qualifications (State the Certificate/Diploma & the Institute where it was acquired) & Proficiency e.g Diploma in Hotel Management, Harare Polytechnic College: Pass
3. Professional Qualifications (State the Qualification & the Institute where it was offered)
4. Degree Qualification (State the name of the Degree & the Institute where it was acquired) & Proficiency e.g., Bachelor of Science in Mathematics, University of Zimbabwe: 2:1

**VERIFIED BY HR DEPARTMENT:**

**NAME:..... Signature.....**

**CERTIFIED BY: NAME..... Signature.....**