



FIJIAN TEACHERS ASSOCIATION  
HEAD OFFICE

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APPLICATION FOR MEMBERSHIP

*I wish to apply for membership of the FIJIAN TEACHERS ASSOCIATION and I AUTHORISE YOU to deduct the subscription of \$12.00 from my salary each pay.*

NAME (MR, MRS, MS) \_\_\_\_\_  
(SURNAME FIRST)

TPF: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PRESENT SCHOOL: \_\_\_\_\_

DATE OF FIRST APPOINTMENT: \_\_\_\_\_

SALARY LEVEL: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

**FIJIAN TEACHERS ASSOCIATION MEMBERS PROFILE  
INFORMATION**

TPF Number: \_\_\_\_\_

Full Name (Mr. /Mrs. /Ms.) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Marital Status: [Married/Single/Divorced/Widow/Widower]

Gender: Male/Female: \_\_\_\_\_

Teacher Type: [Temporary Civil Servant/Civil Servant/Grant in Aid]

Confirmed: **YES/NO** [When]: \_\_\_\_\_

Year Joined Service: \_\_\_\_\_ Year Joined FTA: \_\_\_\_\_

Rural/ Urban: \_\_\_\_\_ Year Ceased as Member: \_\_\_\_\_

Year Joined FTA Welfare: \_\_\_\_\_ Year Joined FTA Credit Union: \_\_\_\_\_

Superannuation Scheme: [**PENSION/ FNPF**] \_\_\_\_\_

FNPF Number: \_\_\_\_\_

Passport Number: \_\_\_\_\_ School Control By: \_\_\_\_\_

Current Posting: \_\_\_\_\_ Substantive Post: \_\_\_\_\_

School Code: \_\_\_\_\_ When Confirmed: \_\_\_\_\_

School Grade: \_\_\_\_\_ Phone (School): \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Phone (Home) \_\_\_\_\_

Koro: \_\_\_\_\_

Tikina: \_\_\_\_\_

Matanitu: \_\_\_\_\_

Yasana: \_\_\_\_\_

School Name & Address:

\_\_\_\_\_

\_\_\_\_\_

School Category: [PRE SCHOOL/ PRIMARY/ SECONDARY/ TERTIARY/ SPECIAL]

School Run By: [Government/ Non Government/ Private] etc: \_\_\_\_\_

School Type: [CO – ED/ NON CO – ED]: \_\_\_\_\_ School Roll: \_\_\_\_\_

School: [Boarding/ Day scholar/ Both]: \_\_\_\_\_

School Upgrade/ Downgrade: \_\_\_\_\_

Education District: \_\_\_\_\_

Branch Name: \_\_\_\_\_

EDUCATION/ QUALIFICATIONS:

SCHOOL/ INSTITUTE	QUALIFICATION OR GRADE ATTAINED	YEAR

TRAINING RECEIVED:

INSTITUTE/ ORGANISATION	QUALIFICATION OR GRADE ATTAINED	YEAR

UNION INVOLVEMENT

BRANCH	POSITION	YEAR

EXTRA INVOLVEMENT


PREVIOUS SCHOOL TAUGHT/ ATTENDED

NAME OF SCHOOL	YEAR	NAME OF SCHOOL	YEAR

Spouse: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Children:

Date of Birth

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_