

## **APPLICATION FORM FOR EMPLOYMENT**

- 1. The purpose of this form is to assist the municipality in selecting suitable candidates for an advertised post.
- 2. This form must be completed in full, accurately and legibly. All substantial information relevant to a candidate must be provided in this form. Any additional information may be provided on the CV.
- 3. Candidates shortlisted for interviews may be requested to furnish additional information that will assist the municipality to expedite recruitment and selection processes.
- 4. All information received shall be treated with strict confidentiality and shall not be used for any other purpose than to assess the suitability of the applicant.
- 5. This form is designed to assist the municipality with recruitment, selection and appointment of staff members in terms of the Municipal Systems Act, 2000 (Act no 32 of 2000)

	ETAILS	S OF	F THE	ADVE	RTIS	SED F	POST (as ref	flected in	the ac	lvert)				
Advertised pos	for													
Reference num														
				I.										
PERSONAL DETAILS														
Surname														
First Names														
ID or Passport I	er													
Gender				Male			Female Notice se			vice period		days		
Race			African			White		Colou	ıred	Inc	Indian			
Do you have a disability?	Yes	No	)		Yes, aborate						•			
Are you a			If not what				your nation	ality?						
South Africa Yes Citizen		No	0	Do yo	u ha	ave a	a valid work permit?			Yes	N	0		
Do you hold a profession membership with any professional body?			al	Ye	S	No	Name of P body	Profession	nal	Membership	No	Expir	y date	
CONTACT DETAILS														
Telephone num														
during office ho														
Mobile Phone														
Number														
E-mail address														
Home address														
		_												

Preferred language														
of communication														
	11.61		QUALIF	ICATIO	N									
Highest educational q	 													
Name of the school					Highest G	raue	<u> </u>			Year				
110-b T 116	•••-		- 4											
Highest Tertiary qualification obtained   Name of Institution Name of Qualification NQF Level Year Obtained														
Name of mstitution	ie or Quanneation			NQI LEVEI					Tear Obtained					
			WORKING								_			
Employer(starting with	1 F	Post Held	t	From			То				Reason for Leaving			
the most recent)				Year	Monti	า	Year	•	Mor	ith				
			DISCIPLI	NARY	RECORD									
Have you been dismiss	ed fo	r miscon	nduct durin	g the p	oast 10 yea	rs		Yes			No			
If yes, Name of the														
Municipality/Employe			•											
Type of misconduct/Tr														
Date of Resignation/D case finalised/Dismiss	-	inary												
	a I													
Award/Sanction				-						-1		1		
Have you been accuse								No						
job pending finalisatio	n oi t	ne discip	ninary proc	ceeam	gs									
			CRIMIN	IAI RF	CORD									
Have you been convict														
a court of law during t														
If yes, type criminal ty	pe				l						I			
Date Criminal case fina														
Outcome judgement														
Name of D. C		1-4:-		NCE(P	lease elabo			our C	_					
Name of Referee	Re	elationsh	ıp	Tel (Office Hours) E-n					·mai	I				
	<u> </u>													
			DECLARA											
I hereby declare that all th														
best of my knowledge tru may lead to my disqualific										aisclo	ose any	ınforma	tion	
may lead to my disqualific	Lution	or termin	uuun oj my	employ	ment contra	ci, If	uppo	iiilea.						
Signature:					Date:									