NDLAMBE MUNICIPALITY



P O Box 13, Port Alfred, 6170 Tel: (046) 604 5500 Fax: (046) 624 2669

APPLICATION FOR EMPLOYMENT FORM

- 1. The purpose of this form is to assist a 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 municipalities 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 municipality with the recruitment, selection, and appointment of staff members in terms of the Municipal Systems Act, 2000 (Act No. 32 of 2000)

DETAILS OF THE ADVERTISED POST (as reflected in the advert)

Advertised post applying								
for								
Reference number								
Name of the								
Municipality								
Notice service period								
PERSONAL DETAILS								
Surname								
First Names								
ID or Passport Number								
•								
Gender	Male			Female				
Race	African	rican White			Coloured Indian			
Do you have a disability?		Yes	No	If ye	s, elaborate			
Ara vav a Cauth		Yes	No	16	+ba+ iaa			
Are you a South African Citizen?		res	No		t, what is your onality?			
Ajricum Citizem:					ou have a valid work	Yes		No
				Pern		163		740
Do you hold a professional Yes		No	Name of professional		Members	ship	Expiry date	
membership with any professional				body		Number		, , , , , , ,
body?								
		ĺ						

CONTACT DETAILS									
Telephone number during office hours									
Mobile phone number									
Mobile phone number									
•				Code					
Email Address		Code							
Preferred language of communication	,								
QUALIFICATIONS (please elabor Highest educational qualification obto		your Cv)							
Name of the School	iinea	Highest Grad	la		Voor	Vann Ohtainad			
Name of the School		Highest Grad	ie		Teur	Year Obtained			
Highest tertiary qualification o	htainea	<u> </u>							
Name of Institution	Diamed	Name of a qu	ualification		NQF lev	ıol	Year Obtained		
Nume of institution		wante of a qu	adiljicacion		//Q/ /C/		rear obtained		
WORK EXPERIENCE (please elai	borate (on your CV)	1						
Employer (starting with the most	Post he	ld	From	T	То	Reason for			
recent)			Month	Year	Month	Year	leaving		
DISCIPLINARY DESCRIP									
DISCIPLINARY RECORD			1		A1 -	1			
Have you been dismissed for misconduct during the past ten (10)	Yes				No				
years?									
If yes, Name of Municipality/						1			
Employer									
Type of a Misconduct/ Transgression									
Date of Resignation/ Disciplinary case									
finalised/Dismissal									
Have you been accused of an alleged	Yes				No				
misconduct and resigned from your job pending finalisation of the									
disciplinary proceedings?									
CRIMINAL RECORD	1		-			1			
Have you been convicted of any	Yes				No				
criminal offence in a court of law	1.03				110				
during the past ten (10) years?									
If yes, type of criminal act									
Date criminal case finalised									
Outcome / Judgmes ::									
Outcome/ Judgment									

REFERENCES (please elaborate on your CV)					
Name of Referee	Relationship	Tel (office hours)	Cellphone Number	Email	

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DECLARATION	
	oplication and any attachments in support thereof is to the best isrepresentation or failure to disclose any information may lead ontract, if appointed.
Signature:	Date: