

T 046 645 7400/7451 | F 046 645 2562 8 SOMERSET STREET FORT BEAUFORT | 5720 P.O.BOX 36 | FORT BEAUFORT | 5720

## APPLICATION FORM FOR EMPLOYMENT

## TERMS AND CONDITIONS

- 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 will be treated with strictly confidentiality and will 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 senior managers in terms of the *Local Government: Municipal Systems Act*, 2000 (Act No. 32 of 2000).

<b>_</b>						
A. DETAILS OF THE AD	VERTISED P	OST (as re	flected in t	he advert)		
Advertised post applying for						
Reference number		A 9 A				
Name of Municipality						
Notice service period						
·						
B. PERSONAL DETAILS						
Surname					V 1	
First Names						
ID or Passport Number						
Race	African	Coloure	ed	Indian	White	
Gender			***************************************	Female	Male	
Do you have a disability?				Yes	No	
If yes, elaborate						
Are a South African citizen?				Yes	No	
If no, what is your						
Nationality?						
Work Permit Number (if any):						
Do you hold any political office or acting capacity? If yes, prov			er in a perr	nanent, temporar	y No	
Political Party:	Position:	below.		Expiry date:		
Do you hold a professional m		any profes	sional bod		e	
information below	ioniboromp with	arry protoc	ololiai boa	y yoo, provid	No	
Yes					y .	
Professional Body:	Membership Number:			Expiry date:		
C. CONTACT DETAILS						
Preferred language for						
correspondence?						
Telephone number during						
office hours						
Preferred method for	D1				<b>-</b>	
correspondence (Mark with	Post		E-mail	•	Fax	
an X) Correspondence contact						
details (in terms of above)						
details (iii telliis of above)						

D. OLIALIEIO ATIONO /A	11:0		-	010	_			
D. QUALIFICATIONS (A					1	10070		
Name of School / Technica College	I Highest Qua	Highest Qualification Obtained			Year Obtained			
	<u> </u>			QF Leve				
Name of Institution	Name of Qu	Name of Qualification			<u> </u>	Year Obtained		
E. WORK EXPERIENCE	(Additional inf	ormation may be	provided	on vour (	CV)			
Employer (starting with	1	From		То		Reason for		
the most recent)	Position	MM	YY	MM	YY	leaving		
	-							
If you were previously emp	•	•		es		No		
whether any condition exist		your re-employme	ent:					
If yes, provide the name of								
the previous employing								
municipality:								
F. DISCIPLINARY RECO	NDD							
		on or offer E July 2	0112 V	es		No		
Have you been dismissed t		on or after 5 July 2	.0117 1	es		INO		
If yes, Name of Municipality								
Type of a Misconduct/ Tran								
Date of Resignation/ Discip	linary case fina	lised				\		
Award/ sanction					- 1			
Did you resign from your	job on or afte	er 5 July 2011 pe	ending Y	es		No		
finalisation of the disciplina								
on a separate sheet.								
C CRIMINAL RECORD								
G. CRIMINAL RECORD	a primainal offe	ana involvina fin	ancial V			INo		
Were you convicted of				es		No		
misconduct, fraud or corru provide details on a separa		lei 5 July 2011?	ii yes,					
If yes, type of criminal act	ile Sileet.							
Date criminal case finalised								
Outcome/ Judgment	-							
Outcome/ dadgment								
H. REFERENCE					19.1	V		
Name of Referee Relat	ionship	Tel (office hours)	Cellp	hone Nu	mber	Email		
						/		
	-							
I. DECLARATION								
I hereby declare that all the								
is to the best of my know								
disclose any information i	riay ieaa to m	y aisquaiitication (	or termina	uon ot n	iy em	oloyment contract,		
appointed.								
<u> </u>		T_ :						
Signature:		Date:						