

APPLICATION FOR EMPLOYMENT

TERMS AND CONDITIONS

- 1. The purpose of this form is to assist the municipality in selecting suitable candidates for an advertised position.
- 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 other 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 will be treated with strict 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 the municipality with the recruitment, selection, and appointment of municipal staff in terms of the Local Government:

 Municipal Systems Act. 2000 (Act No. 32 of 2000) and related Local Government; Municipal Staff
 - Municipal Systems Act, 2000 (Act No. 32 of 2000) and related Local Government: Municipal Staff Regulations.

regulations.				
A. DETAILS OF ADVERTISED F	POST			
Advertised post applied for				
Notice service period				
Do you have the required qualification	n for the posi	tion?	Yes	No
B. PERSONAL DETAILS			•	•
Surname				
First names				
Physical Address				
Province				
Do you have driver's license?	Yes		No	
If yes, what code?				
ID or Passport Number				
Race (Mark with X)	African	Coloured	Indian	White
Gender (Mark with X)	Female		Male	
Do you have a disability? (Markwith	Yes		No	
X)				
If yes, elaborate				
Are you a South African citizen?	Yes		No	
If no, what is your Nationality?			-1	
_Work permit number ifapplicable				

Do you hold a professional membership with any professional body? If yes provide information		Yes				No		
below. Professional Body		Membership No.				Expiry date		
Tioressional Body		IVICII	ioersinp 140.			Слрі	пуч	iate
C. CONTACT DETAILS								
Preferred language for								
correspondence								
Telephone number during office								
hours								
Preferred method for correspondence (Mark with X)		Post E-Mai		ail	il Fax		Fax	
Email address								
D. QUALIFICATIONS (Add			nation may b		vide			CV)
Is your experience relevant to the posi-				Yes	No			
How many years of relevant exp	erience	e do yo	ou have?					
Name of School/ Technical College	Highe obtain	est Qualification ned				Year obtained		
Name of Tertiary Institution	Qualification obtained			NQF Level			Year Obtained	
E. WORK EXPERIENCE (A				ıy be p			_	
Employer	Perio	Period of service			Reason for leaving			
If you were previously employ indicate whether any condition					Ye	S		No
employment. (Mark with X)								
If yes, provide the names of the previous municipal institutions								
F. DISCIPLINARY RECOR								
Have you been dismissed for n		luct di	ring the pas	t ten	Ye	S		No
(10) years?								
If Yes, Name of Municipality	/Institu	tion						ı
Details of Misconduct/Transgro	ession							
Date of Termination/Disciplina case finalised/ Dissmissal	ary							
Award/Sanction								
Awaru/Sancuon								

Have you been accused of an alleged misconduct and resigned					Yes	No		
from your job pend	ling finalisati	on c	of the		_			
disciplinary procee	dings?							
G. CRIMINAL R	RECORD						·	
Have you been convicted of any criminal offence in a court of law during the past ten (10) years?				Yes	No			
If yes, type of crin	ninal act							
Date crime case f	inalised							
Outcome/Judgmen	nt							
H. REFERENCE	ES	ı						
Name of	Relationship		Tel (Office		Cell phone		E-Mail	
referee			hours)		number			
I. DECLARATION	ON							
attachments in sur	oport thereof esentation or termination	is to r fa	the best of a	my kno sclose	wledge	true and co	cion form and any prrect. I understand may lead to my	
Signature:				Date:				