

CONFIDENTIAL

MOGALAKWENA MUNICIPALITY

APPLICATION FOR EMPLOYMENT

WHAT IS THE PURPOSE OF THIS FORM

To assist the municipality in selecting a person for an advertised post.

This form may be used to identify candidates to be interviewed. Since all applicants cannot be interviewed, you need to fill in this form completely, accurately and legibly. This will help to process your application fairly.

WHO SHOULD COMPLETE THIS FORM

Only persons wishing to apply for an advertised position in the municipality.

ADDITIONAL INFORMATION

This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.

SPECIAL NOTES

- 1. All information will treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details must correspond with the details in your ID or passport.
- 2. Passport number in the case of non-South Africans.
- 3. This information is required to enable the department to comply with the Employment Equity Act No. 55 of 1998.
- 4. This information will only be taken into account if it directly relates to the requirements of the position.
- 5. Applicants with substantial qualifications or work experience must attach a CV.

A. THE ADVERTISED P	оѕт							
Position for which y applying (as advertised)		Department where the position was advertised						
Reference number (as stated in the advert)			If you were offered the position, when can you start OR how much notice must you serve with your current employer?					
B. PERSONAL INFORM	IATION							
Surname								
First Names								
Postal Address								
Date of Birth								
Identity Number ²								
Race ³	Africa	7	White		Coloure	d	India	an
Gender ³	er ³				Female		Male	
Do you have disability? ³					Yes		No	
Are you a South African of		Yes I		No				
If no, what is your national	ality?							
And do you have a valid		Yes		No				
Have you been convicte or been dismissed from e	Yes		No					
If Yes, state the particular	rs							
C. HOW DO WE CONTA	ACT YO	U						
Method of correspondence	Method of correspondence Tel/		Cell Fax		l mela	E-r	E-mail	
Correspondence cont details (in terms of above								

D. LANGUAGE	ANGUAGE			Γ							
Speak										-	
Read											
0.000000											
Write											
E. QUALIFICA	TIONS									***************************************	
Name of School/Technical College		Highest qualification obtained			d	Year Obtained					
Tertiary education		te for eac	h qualif	ication y	ou obta	ined)					
Name of institution		Name of qualification					Year Obtained				
Current study (institution and qualification											
Jurrent study (II	nstitution a	nd qualific	cation):								
. WORK EXP	ERIENCE										
Employer (including P		ost Held		Fre	From		То	Reason for leaving			
current employer)	10	1 ost Held		MM	YY	MM	1 YY	Treason for leaving			
					-	†					
						 					
		***************************************				1					
G. REFERENC	ES										
declare that all	I the inform ge. I unde	rstand tha	at any f	alse info	any attormation	achme suppl	nts) i lied c	s comple ould lea	ete and cor d to my ap	rect to the be oplication bein	
DECLARATION declare that all of my knowled disqualified or n	I the inform ge. I unde	rstand tha	at any f	alse info	any attormation	achme n suppl	nts) i lied c	s comple ould lead	ete and cor d to my ap	rect to the be oplication beir	