



APPLICATION FORM FOR EMPLOYMENT

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 | General Worker / Assistant: Cleaning and Gardening Services (Mossel Bay) |
| Name of the Municipality | Mossel Bay Municipality |
| Notice service period | |

PERSONAL DETAILS

| | | | | |
|---|---------|----|-----------------------------------|-------------------------------|
| Internal Candidate | Yes | No | Personnel No: | |
| Surname | | | | |
| First Names | | | | |
| ID or Passport Number | | | | |
| Gender | Male | | Female | |
| Race | African | | White | Coloured Indian |
| Do you have a disability? | Yes | No | If yes, elaborate | |
| Are you a South African Citizen? | Yes | No | If not, what is your nationality? | |
| | | | Do you have a valid work Permit? | Yes No |
| Do you hold a professional membership with any professional body? | Yes | No | Name of professional body | Membership Number Expiry date |
| List all languages you are proficient in (read, write, speak) | | | | |

| | | | | |
|-------------------------------------|-----|----|-------------------------|--|
| Do you have valid driver's license? | Yes | No | If yes, specify code(s) | |
|-------------------------------------|-----|----|-------------------------|--|

| CONTACT DETAILS | | | |
|--------------------------------------|--|----------|-------|
| Telephone number during office hours | | () | |
| Mobile phone number | | | |
| Residential Address | | | |
| | | | Code: |
| Email Address | | | |
| Preferred language of communication | | | |

| QUALIFICATIONS (please elaborate on your CV) | | | |
|--|-------------------------|---------------|---------------|
| Highest educational qualification obtained | | | |
| Name of the School | Highest Grade | Year Obtained | |
| | | | |
| Highest tertiary qualification obtained | | | |
| Name of Institution | Name of a qualification | NQF level | Year Obtained |
| | | | |
| | | | |
| | | | |

| WORK EXPERIENCE (please elaborate on your CV) | | | | | | |
|---|-----------|-------|------|-------|------|--------------------|
| Employer (starting with the most recent) | Post held | From | | To | | Reason for leaving |
| | | Month | Year | Month | Year | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| DISCIPLINARY RECORD | | | | |
|--|-----|--|----|--|
| Have you been dismissed for misconduct during the past ten (10) years? | Yes | | No | |
| If yes, name of Municipality/ Employer | | | | |

| | | | | |
|---|-----|--|----|--|
| Type of a Misconduct / Transgression | | | | |
| Date of Resignation / Disciplinary case Finalized / Dismissal | | | | |
| Award / sanction | | | | |
| Have you been accused of an alleged misconduct and resigned from your job pending finalization of the disciplinary proceedings? | Yes | | No | |

| CRIMINAL 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 criminal act | | | | |
| Date criminal case finalized | | | | |
| Outcome/ Judgment | | | | |

| REFERENCES (please elaborate on your CV) | | | | |
|--|--------------|--------------------|------------------|-------|
| Name of Referee | Relationship | Tel (office hours) | Cellphone Number | Email |
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| DECLARATION | |
|--|-------|
| <i>I hereby declare that all the information provided in this application and any attachments in support thereof is to the best of my knowledge true and correct. I understand that any misrepresentation or failure to disclose any information may lead to my disqualification or termination of my employment contract, if appointed.</i> | |
| Signature: | Date: |