

APPLICATION FOR EMPLOYMENT

TERMS AND CONDITIONS

- 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 subsatial 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 reqsted to furnishaddiional information that will assist municipalities to expedite recruitment and selection processess.
- 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. Thi form is designed to assist municipality with the recruitment, selection and appointmet of senior managers in terms of the Local Government: Municipal Systems Act, 2000 (Act No.32 of 2000) and non senior managers in terms of the Victor Khanye Local Municipality's Employment Practice Policy.

A. DETAILS OF THE AD	VER	TISED POST (as reflected in	the adve	rt)		
Advertised post applying for							
Reference number							
Name of Municipality							
Notice service period							
B. PERSONAL DETAILS	3						
Surname							
First names							
Date of birth							
Identity number							
Race	Afri	can	White	Coloure	d	Indian	
Gender				Female		Male	
Do you have a disability?			Yes		No		
If yes, elaborate							
Are you a South African ci	?		Yes		No		
If no, what is your nationality?							
Work Permit Number (if any):							
Do you hold any political office in a political party, whether in a permanent, temporary or acting capacity? If yes, provide information below.							
Political Party:	Position:			Expiry date:			
Do you hold a professional membership with any professional body? If yes provide information below							
Professional Body:		Membership Number:			Expiry date:		
C. HOW DO WE CONTA	CT Y	ΟU					
Preferred language for							
correspondence?	office						
Telephone number during hours	OHICE	;					

Preferred method for correspondence (Mark with an X)		Post		E-mail		Fax					
Correspondenc details (in terms of abo											
D. QUALIFICATIONS	(Additiona	al informat	tion m	ay be pr	ovide	d or	your CV)				
Name of School/Techni College	•	Highest qualification obtained Year obtained									
Name of institution	Na	ame of qua	alificat	ion		NQ	F Level		Year obtained		
E WORK EXPEDIENC	NE /A 1.10	1				• 1					
E. WORK EXPERIENCE (Additional information may be provided on your CV) Employer (starting with Position From To							Reason for				
the most recent)	WILLI	Position		From		То			leaving		
,				MM	l YY		MM YY		g		
If you were previous	sly employ	ed in the L	ocal G	overnme	ent. inc	licate	e whether any	1			
condition exists that					,,,,,,,,,,	out	o milotiloi ariy		Yes	No	
If yes, Provide the r											
the previous employ department	/ing										
чораннон											
F. DISCIPLINARY REC									1		
Have you been dismiss If yes, Name of Municip			or afte	er 5 July	2011?		Yes		No		
Type of a misconduct/ T											
Date of Resignation/ Dis			ed								
Award/ sanction									T		
Did you resign from your finalisation of the discip							Yes		No		
a separate sheet.	шагу ргос	eedings? i	ii yes p	novide d	etalis	s on					
G. CRIMINAL RECORD)										
Were you convicted misconduct, fraud or cor	of a crin ruption on						Yes		No		
details on a separate shalf yes, type of criminal ac											
Date crimal case finalise											
Outcome/ Judgement											
H. REFERENCES											
Name of Referee Relat		tionship Tel. No. (c		o. (office	e hours)		Cellphone Number		er Email		
I. DECLARATION							_				
I declare that all the inform my knowledge true and co											
disqualified or termination						ı ıalı	are to disclose	arry IIIIO	adon may	Toda to IIIy	
Signature:					Date:						