

## ANNEXURE C

### APPLICATION FORM 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 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 municipality 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				
<b>A. DETAILS OF THE ADVERTISED POST as reflected in the advert</b>				
Advertised post applying for				
Reference number				
Name of Municipality				
Notice service period				
<b>B. PERSONAL DETAILS</b>				
Surname				
First Names				
ID or Passport Number				
Race	African	Coloured	Indian	White
Gender			Female	Male
Do you have a disability ?			Yes	No
If Yes, elaborate				
Are you a South African citizen?			Yes	No
If no, what is your Nationality				
Work Permit Number if any				
Do you hold a professional membership with any professional body? If yes, provide information below.			Yes	No
Professional Body	Membership Number:	Expiry date:		
<b>C. CONTACT DETAILS</b>				
Preferred language for correspondence?				
Cell phone Number				
Preferred method for correspondence (Mark with an X)	Post	E-mail	Fax	
Correspondence contact details in terms of above				

D. QUALIFICATIONS Additional information may be provided on our CV						
Name of School		Highest Grade Passed		Year Obtained		
Name of Institution		Name of Qualification		NQF Level	Year Obtained	
E. WORK EXPERIENCE Additional information may be provided on our CV						
Employer (starting with the most recent)	Position	From		To		Reason for leaving
		MM	YY	MM	YY	
F. REFERENCE						
Name of Referee	Relationship	Tel		Cell Number		Email
G. DECLARATION						
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.						
signature:				Date:		