



AMATHOLE DISTRICT MUNICIPALITY

Municipal Manager
 Waverly Officer Park | 3 – 33 Philip Frame Road | Chiselhurst | 5247
 P.O. Box 320 | East London | South Africa | 5200
 Telephone: 043 701 4000 | Facsimile: 043 742 0337
 Email: info@amathole.gov.za | Web Address: www.amathole.gov.za

APPLICATION FORM FOR VACANCIES

All applicants are required to submit the following information

- Application form (see below).
- Full curriculum vitae.
- 3 months stamped certified copies of all relevant academic certificates including the ID
- Pages of the filled application form must be initialed and be signed on the last page by the applicant.
- Any other relevant information specified in the advertisement.

Ref: 4/3/R

An application that does not comply with the above requirements will be regarded as incomplete.

| A. DETAILS OF THE ADVERTISED POST (as reflected in the advert) | |
|--|--|
| Post applying for | |
| Post reference number | |
| Notice service period | |

| B. PERSONAL DETAILS | | | |
|---|--------------------|----------------------|--------------|
| Title | | Initials | |
| Surname | | | |
| First Names | | | |
| ID or Passport Number | | | |
| Race (for stats purposes) | African | Coloured | Indian White |
| If none of the above, please provide details | | | |
| Gender | | Female | Male |
| Driver's licence | | If yes, licence code | |
| Postal Address | | | |
| Physical Address | | | |
| E-mail Address | | | |
| Work Number | | Home Number | |
| Fax Number | | Mobile Number | |
| Do you have 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 any political office in a political party, whether in a permanent, temporary or acting capacity? If yes, provide information below. | | Yes | No |
| Political Party: | Position: | Expiry date: | |
| Do you hold a professional membership with any professional body? If yes, provide information below | | Yes | No |
| Professional Body: | Membership Number: | Expiry date: | |

Initial

| C. CONTACT DETAILS | | | |
|--|------|-------|-----|
| Preferred language for correspondence? | | | |
| Telephone number during office hours | | | |
| Preferred method for correspondence (<i>mark with an X</i>) | Post | Email | Fax |
| Correspondence contact details (in terms of above) | | | |

| D. LANGUAGE PROFICIENCY - state 'good', 'fair' or 'poor' | | | | |
|--|-----------------------|--|--|--|
| | Languages (specified) | | | |
| Speak | | | | |
| Read | | | | |
| Write | | | | |

| E. QUALIFICATIONS (Additional information may be provided on your CV). All qualifications are verified prior to appointment | | | |
|---|--------------------------------|---------------|---------------|
| Name of School / Technical College | Highest Qualification Obtained | Year Obtained | |
| | | | |
| Name of Institution | Name of Qualification | NQF Level | Year Obtained |
| | | | |
| | | | |

| F. WORK EXPERIENCE (Additional information may be provided on your CV) | | | | | | |
|--|----------|------|----|-----|----|--------------------|
| Employer (starting with the most recent) | Position | From | | To | | Reason for leaving |
| | | MM | YY | MM | YY | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| If you were previously employed in Local Government, indicate whether any condition exists that prevents your re-employment: | | | | Yes | | No |
| If yes, provide the name of the previous employing municipality | | | | | | |

| G. DISCIPLINARY RECORD | | |
|---|-----|----|
| Have you been dismissed for misconduct? | Yes | No |
| If yes, Name of Municipality/Institution: | | |
| Type of a Misconduct / Transgression | | |
| Date of Resignation / Disciplinary case finalised | | |
| Award / Sanction | | |
| Did you resign from your job pending finalization of the disciplinary proceedings? If yes, provide details on a separate sheet. | Yes | No |

Initial.....

| H. CRIMINAL RECORD | | |
|---|-----|----|
| Were you convicted of a criminal offence involving financial misconduct, fraud or corruption If yes, provide details on a separate sheet. | Yes | No |
| If yes, type of criminal act | | |
| Date criminal case finalised | | |
| Outcome / Judgment | | |

| I. REFERENCE | | | | |
|---------------------|--------------|--------------------|---------------|-------|
| Name of Referee | Relationship | Tel (office hours) | Cellphone No. | Email |
| | | | | |
| | | | | |
| | | | | |

| J. 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: | |