FRANCES BAARD

DISTRICT MUNICIPALITY

Private Bag X6088 KIMBERLEY, 8300 TEL: (053) 8380911

51 Drakensberg Avenue

FAX: (053) 8611538 KIMBERLEY, 8301

APPLICATION FOR EMPLOYMENT

CONFIDENTIAL

NOTE:

COMPLETION OF THIS FORM:

Persons who wish to apply for an advertised position should complete this form in his/her own handwriting.

The undermentioned notes refer to the completion of the application.

- 1. Information supplied will be treated in the strictest confidence and will not be used for any other purpose than to assess the suitability of a person for employment as is permitted by law. CERTIFIED COPIES OF QUALIFICATIONS and relevant documents MUST accompany this application.
- 2. Certified copies required of **IDENTITY DOCUMENT** or **PASSPORT** and **WORK PERMIT** in the case of non-RSA citizens.
- 3. *Information required to ensure compliance with the Employment Equity Act.*
- 4. Information will only be used if it relates to requirements of the position.
- 5. May be ignored if a detailed CV which includes all information, is attached.
- 6. Canvassing for appointment will disqualify an applicant.

EMPLOYMENT EQUITY DETAILS (REFER NOTE 3)

RACE	African	White	Coloured	Indian
GENDER		Female	Male	

QUALIFICATIONS AND TRAINING (REFER NOTE 5)

		S	chool	Univer	sity / College	Technikon / Other	
Name of Institution	า						
2 Qualifications and	year obtain	ea.					
3. Subjects		1	1			1	
		2		. 2		2	
		3		. 3		3	
		4		. 4		4	
		5		. 5		5	
<u> </u>			KIENCE	(NE EN NOTE 3)		<u> </u>	
		1			1		
EMPLOYER'S NAME:							
LENGTH OF SERVICE	From						
To		1			+		
DESIGNATION							
ANNUAL							
SALARY							
	1.						
FRINGE BENEFITS	2.						
	3.						
				••			

SUMMARY OF DUTIES		 	
	1.	 	
	2.	 	
	3.	 	
	4.	 	
	5.		
	6.	 	
	7.	 	
	8.	 	
	9.	 	
	10.	 	
	70.	 	
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Reason for Change			

HOBBIES AND ACHIEVEMENTS (5)	
State any particular interest in sport and hobbies etc., and mention achievements in any field and/or position held	

PERSONAL REFERENCES PREFERABLY IN WORK CAPACITY (5)				
NAME	OCCUPATION	TELEPHONE		
1.				
2.				
3.				

FOR OFFICE USE ONLY	
Appointed as:	From:
STATEMENT	
I declare that the information furnished is correct and that should my application and should I fail to assume duties accordingly, the Council may initiate leadershoot contract.	
Signature:	Date:
Provide date and details of registration:	