ANNEXURE C

APPLICATION FORM FOR EMPLOYMENT

TERMS AND CONDITIONS

- The purpose of this form is to assist a municipality in selecting suitable candidates for an advertised post.
- 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.
- Candidates shortlisted for interviews may be requested to furnish additional information that will assist
 municipalities to expedite recruitment and selection processes.
- 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.
- This form is designed to assist municipality with the recruitment, selection and appointment of senior managers in terms of the Local Government: Municipal Systems Act, 2000 (Act No. 32 of 2000).

A. DETAILS OF THE ADVERTISED POST (as reflected in the advert)

Advertised post applying for

Reference number
Name of Municipality
Notice service period

Surname				
First Names				
ID or Passport Number				171
	Acia	To.	DO GO GO DESCRIPTION	TOTAL SECTION
Race	African	Coloured	Indian	White
Gender disability 0	Female	Male		
Do you have a disability?	-		Yes	No
If yes, elaborate				
Are a South African citizen?	The second second	Same and Alexander	Yes	No
If no, what is your Nationality?				
Work Permit Number (if any):				5-2-40 t M
Do you hold any political officer acting capacity? If yes, pro	ce in a political	party, whether in a below.	permanent, temporar	y No
Political Party:	Position:	TOTAL		
Do you hold a professional information below Yes	membership wi	th any professional	body? If yes, provide	e No
Professional Body:	Membership	FIRST DE VENDE		
- Committee of the Comm				
C. CONTACT DETAILS				
Preferred language for correspondence?	al to receive	eta afrika in inga man		St. A. Shirth
		musical firms for both	nami Police de Pira. O cual de la cuanci	g is of ear No is a soul
Telephone number during office hours	William Street To a			
	Post	E-ma	il	Fax

E. WORK EXPERIENCE (Additional information may be provided on your CV)	Name of School / Techni College	cal Highest C	Highest Qualification Obtained			Year Obtained			
Employer (starting with the most recent) Position From To Reason the most recent) Position From MM YY MM YY MM YY MM YY MM YY MM YY Reason the most recent) If you were previously employed in Local Government, indicate whether any condition exists that prevents your re-employment: If yes, provide the name of the previous employing municipality: F. DISCIPLINARY RECORD Have you been dismissed for misconduct on or after 5 July 2011? 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 on or after 5 July 2011 pending finalisation of the disciplinary proceedings? If yes, provide details on a separate sheet. G. CRIMINAL RECORD Were you convicted of a criminal offence involving financial misconduct, fraud or corruption on or after 5 July 2011? If yes, provide details on a separate sheet. If yes, type of criminal act Date criminal act Date criminal act Date criminal case finalised Outcome/ Judgment H. REFERENCE Name of Referee Relationship Tel (office hours) Cellphone Number Email I. DECLARATION I hereby declare that all the information provided in this application and any attachments in support discolose any information may lead to my disqualification or termination of my employment coldisclose any information may lead to my disqualification or termination of my employment coldisclose any information may lead to my disqualification or termination of my employment coldisclose any information may lead to my disqualification or termination of my employment coldisclose any information may lead to my disqualification or termination of my employment coldisclose any information may lead to my disqualification or termination of my employment coldisclose any information of my employment coldisclose any information may lead to my disqualification or termination of my employment coldisclose any information may lead to my disqualification or termination of my employment coldis	Name of Institution	Name of 0	Name of Qualification			el	Year Obtained		
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