AMAHLATHI MUNICIPALITY

APPLICATION FOR EMPLOYMENT

HUMAN RESOURCES DEPARTMENT

043 - 683 1100

POSITION APPLIED FOR: _____

NEWSPAPER IN WHICH ADVERT WAS SEEN: _____

DIRECTIONS:

- a) This form must be completed in your own handwriting. Any false statements made will render a successful candidate liable to instant dismissal.
- b) Any person canvassing with a view to being appointed to a post in the Council's Service shall not be considered for an appointment.
- c) Certified copies of all qualifications (certificates, diplomas or degrees) must accompany all application forms in order to be considered.
- d) Please attach copies of testimonials and/or covering letter for further details.

PERSONAL PARTICULARS

MR/MRS/MISS:	SURNAME :			
FULL NAME(S) :				
ADDRESS :				
		POSTAL CODE :		
TELEPHONE :	HOME			WORK
OTHER MEANS OF CONTACT IF NO	TELEPHONE :			
No. OF DEPENDANTS :	AGES :			
ARE YOU A SA CITIZEN :	I.D. No. :			
ARE YOU AT PRESENT STUDYING F	URTHER? YES		NO	
COURSE :				
SUBJECTS COMPLETED :				

FOR AFFIRMATIVE ACTION PURPOSES:

PHYSICAL DISABILITIES?	YES	NO
YES, SPECIFY :		
ALIFICATIONS		
1. SCHOOL EDUCATION		
HIGHEST STD PASSED	D :	YEAR :
NAME OF SCHOOL (S)	:	
SUB IECTS PASSED -		

2. **UNIVERSITY AND/OR POST MARTIC TRAINING**

NAME OF INSTITUTION	FROM	то	SUBJECTS PASSED	
DEGREE AND/OR DIPLOMA ATTAINED :				

3. APPRENTICESHIP

TRADE :		
PERIOD OF APPRENTICESHIP : FROM	ТО	_

AT WHICH FIRM DID YOU COMPLETE YOUR APPRENTICESHIP?

4. OTHER QUALIFICATIONS

SHORTHAND / SPEED	WRITING : _	W	'PM TY	PING :	WPM
DICTAPHONE	YES	NO			
OTHER QUALIFICATIO)NS :				

EXPERIENCE

PRESENT AND PREVIOUS POSITIONS HELD (Start with your present / latest position)					
Name & Address of Employer	Position Held	Immediate Supervisor	Period of Service	Wage / Salary per Annum	Reason for Termination of Service
1.		Tel:	From: To:		
2.		Tel:	From: To:		
3.		Tel:	From: To:		
4.		Tel:	From: To:		
5.		Tel:	From: To:		
6.		Tel:	From: To:		
7.		Tel:	From: To:		
8.		Tel:	From: To:		

MENTION ANY SPECIAL EXPERIENCE INDICATING SUITABILITY FOR THE POSITION YOU ARE APPLYING FOR:

LANGUAGE PROFICIENCY

ANSWER YES OR NO

	SPEAK	READ	WRITE
ENGLISH			
AFRIKAANS			
XHOSA			
OTHER			

GENERAL

WHAT IS YOUR PRESENT OCCUPATION? _____

NAME OF COMPANY :

WHAT IS YOUR PRESENT SALARY : _____ PER ANNUM

WHY DO YOU WISH TO LEAVE YOUR PRESENT EMPLOYMENT?

HAVE YOU BEEN CONVICTED OF A CRIMINAL OFFENCE OR DISMISSED FROM ANY EMPLOYMENT? IF SO, FURNISH FULL PARTICULARS :

HAVE YOU ANY PHYSICAL OR MENTAL DEFECTS THAT WOULD PREVENT YOU FROM PERFORMING THE FUNCTIONS ATTACHED TO THIS POSITION? IF SO, FURNISH FULL **PARTICULARS**:

DO YOU HAVE A DRIVER'S LICENCE?	YES	NO	

IF YES, INDICATE WHETHER LIGHT, MEDIUM OR HEAVY DUTY : _____

: _____ DATE : _____

IF APPOINTED, WHEN CAN YOU COMMENCE DUTY? _____

1._____

GIVE NAMES, ADDRESSES AND TELEPHONE NUMBERS OF TWO PERSONS TO WHOM REFERENCE CAN BE MADE, OTHER THAN RELATIONS OR EMPLOYERS :

I DECLARE THAT THE INFORMATION GIVEN BY ME IS TRUE AND CORRECT. I FURTHER AUTHORISE THE AMAHLATHI MUNICIPALITY, OR ITS REPRESENTATIVES, TO VERIFY THE INFORMATION AND QUALIFICATION STATED ON THIS FORM, AS WELL AS MY CREDIT STATUS, SHOULD SUCH INFORMATION BE REQUIRED.

SIGNATURE

DATE

FOR OFFICE USE ONLY						
UNSUCCESSFUL	APPOINTMENT	PROMOTION	TRANSFER	TEMPORARY	PERMANENT	
WITH EFFECT FROM POST LEVEL NOTCH						
SPECIAL CONDITIONS RELATING TO THIS APPOINTMENT						