

**QUALITY COUNCIL FOR TRADES AND QUALIFICATIONS
EMPLOYMENT APPLICATION FORM**

TERMS AND CONDITIONS 1. The purpose of this form is to assist QCTO 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 QCTO to expedite recruitment and selection processes. 4. All information received will be treated with strict 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 QCTO with the recruitment, selection and appointment. NOTE: A detailed Curriculum Vitae, certified copies of identity document, Grade 12 certificate and the highest required qualifications as well as a driver's license where necessary, will only be submitted by shortlisted candidates to Human Resources on or before the day of the interview date. Failure to do so will result in your application being disqualified.	A. DETAILS OF THE ADVERTISED POST (All sections of this form must be compulsory)														
	Position for which you are applying (as advertised)														
	Reference number of the post (as stated in the advert)														
	Notice period you have to serve with your current employer.														
	Internal applicant (Mark with X)					External Applicant (Mark with X)									
	B. PERSONAL DETAILS														
	Surname														
	First Names														
	Identity Number														
	Passport Number														
	Race (Mark with X)					African		Coloured		Indian		White		Other	
	Gender (Mark with X)					Male			Female						
	Do you have a disability? (Mark with X)					Yes			No						
	Are you a South African Citizen? (Mark with X)					Yes			No						
	If no what is your Nationality?														
	Do you have a valid Work Permit? (Yes/No)					Yes			No						
	How did you find out about this vacancy?														
	Do you have close family or relatives employed at the QCTO? (Mark with X) If yes, provide details.					Yes			No						
	Have you ever been convicted or found guilty of a criminal offence (Including an admission of guilty)? (Mark with X). If yes, provide details.					Yes			No						
	Do you have any pending criminal cases against you? If yes, provide details. (Mark with X). The QCTO shall consider the criminal record (s) against the nature of the job functions in-line with internal information security and Disciplinary Code.					Yes			No						
Have you ever been dismissed for misconduct? (Mark with X)					Yes			No							
If yes, provide details.															
Have you been subjected to any disciplinary process by your current employer? (Mark with X) If yes, provide details.					Yes			No							
Have you been subjected to disciplinary process by any of your previous employers? (Mark with X) If yes, provide details.					Yes			No							
Are there any disciplinary matters that you are aware of pending against yourself? (Mark with X) If yes, provide details.					Yes			No							
Have you resigned from any job pending any disciplinary proceeding against you? (Mark with X) If yes, provide details.					Yes			No							
Are you conducting business with the QCTO, or are you a Director, an employee (Full or Part time) or benefiting from any company conducting business with the QCTO (including Skills Development Providers or Assessment Centres)? If yes, provide details. (Mark with X)					Yes			No							
Are you conducting business with the Government and/or any organ of the state, or are you a Director of any company conducting business with the Government and/or any organ of the state? If yes, provide details (Mark with X)					Yes			No							
In the event that you are employed in the QCTO, will you immediately relinquish such business interest?					Yes			No							
Is there anything that you are aware of that may prevent you to be re-employed? (Mark with X). State reasons.					Yes			No							
Have you been discharged or retired from employment on grounds of ill-health or on condition that you cannot be re-employed? (Mark with X). State reasons.					Yes			No							
Is there anything that you would like to disclose? (Mark with X)					Yes			No							
Do you hold a professional membership with any professional body? (Mark with X)					Yes			No							
Provide professional body name															
Membership Number					Expiry Date										

C. CONTACT DETAILS				
Preferred language for correspondence?				
Telephone number during office hours.		1.		
		2.		
Preferred method of correspondence (Mark with X)		Post		E-mail
Correspondence contact details (In term of the above)				Fax

D. QUALIFICATIONS		
Name of the School/Technical College		
Highest Grade/Standard or Qualification obtained (e.g. Grade 12)	Year Obtained	
TERTIARY EDUCATION (Complete for each qualification obtained).		
Name of the institution	Name of the Qualification	Year obtained
1.		
2.		
3.		
4.		
Current study (Name of qualification Institution)		

E. WORK EXPERIENCE (Elaborate on your CV)					
Start with Current / Most Recent Employer					
Employer (Starting with the current employer)	From		To		Position
	Year	Month	Year	Month	Reason for leaving
1.					
2.					
3.					
4.					

F. REFERENCE			
Name of Referee	Relationship/Position	Phone Number (office hours)	E-mail address
1.			
2.			
3.			

G. Further relevant information (experience/knowledge/ skills attributed) relative to the position applying for .	
H. DECLARATION	
I declare that to the best of my knowledge, the information given above is true and correct to the best of my knowledge. I understand that inaccurate, misleading or untrue statements or knowingly withholding any information will result in termination of employment with the QCTO. I also hereby give consent for the QCTO to conduct any investigation related to the information provided above, should any matter related to the above come to the attention of the QCTO, the QCTO reserves the right to take any action or disciplinary measures should it emerge in the future that the information provided by myself in this application is found to be incorrect or misrepresented. I further acknowledge that this could also result in my offer or contract of employment made by the QCTO being revoked/terminated. I declare that all the information provided (including any attachments) is correct. I understand that any false information provided will result in my application been disqualified.	
Signature of Applicant: _____	Date: _____