

BUSHBUCKRIDGE LOCAL MUNICIPALITY

APPLICATION FOR EMPLOYMENT



TERMS AND CONDITIONS

1. The purpose of this form is to assist the Municipality in selecting suitable candidates for 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.
3. Candidates shortlisted for interviews may be requested to furnish additional information that will assist the Municipality to expedite recruitment and selection process.
4. All information received will be treated with strict confidentiality and will not be used for any other purpose/s than to access the suitability of the applicant.
5. The form is designed to assist the Municipality with the recruitment, selection, and appointment of employees in terms of Local Government: Municipal Act, 2000 (Act No. 32 of 2000) and other applicable legislations.

1. THE ADVERTISED POSITION

STATE THE POSITION WHICH YOU ARE APPLYING FOR																			
STATE THE DIRECTORATE WHERE THE POSITION WAS ADVERTISED																			
REFERENCE NO. (if any as per advert)										DATED									
IF YOU ARE OFFERED THE POSITION, WHEN CAN YOU START?																			

2. PERSONAL DETAILS (BLOCK LETTERS)

SURNAME								FIRST NAME											
DATE OF BIRTH								IDENTITY NUMBER											
POSTAL ADDRESS								POSTAL CODE											
RESIDENTIAL ADDRESS								POSTAL CODE											
HOME TELEPHONE								WORK TELEPHONE											
E-MAIL ADDRESS								CELL PHONE											
DO YOU HOLD A PROFESSIONAL MEMBERSHIP WITH ANY PROFESSIONAL BODY?										IF YES, GIVE DETAILS BELOW									
PROFESSIONAL BODY						MEMBERSHIP NUMBER						EXPIRY DATE							
3. RACE:		AFRICAN				INDIAN				COLOURED				WHITE					
GENDER								DO YOU HAVE A DISABILITY?											
ARE YOU A SOUTH AFRICAN CITIZEN?												IF NO, WHAT IS YOUR NATIONALITY?							
DO YOU HAVE ANY MEDICAL CONDITION THAT COULD BE RELATED TO THE JOB APPLIED FOR?																			
IF YES, GIVE DETAILS																			

4.QUALIFICATIONS																															
NAME OF SCHOOL/TECHNICAL COLLEGE												HIGHEST QUALIFICATION										YEAR OBTAINED									
5.TERTIARY EDUCATION																															
NAME OF INSTITUTION												HIGHEST QUALIFICATION(S)										YEAR OBTAINED									
6.APPRENTICESHIP IN TRADE (RESERVED ONLY FOR ARTISAN VACANCY)																															
TRADE												WITH WHOM APPRENTICESHIP SERVICED?										REGISTRATION NUMBER									
APPRENTICESHIP SERVED FROM												TO																			
APPRENTICESHIP SERVED FROM												TO																			
7.CURRENT STUDIES																															
NAME OF INSTITUTION												QUALIFICATION ENROLLED										YEAR ENROLLED									
8.WORK EXPERIENCE																															
NAME OF EMPLOYER												POSITION HELD										MONTHS/YEARS				REASON FOR LEAVING					
1																															
2																															
3																															
4																															
5																															
HAVE YOU PREVIOUSLY WORKED FOR ANY MUNICIPALITY?																IF YES, WHICH MUNICIPALITY															
POSITION HELD																						DIRECTORATE									
FROM																TO								EMPLOYEE NO.							
REASON FOR LEAVING																															

9. DISCIPLINARY RECORD													
Have you ever been found for misconduct on or after July 2011?						YES				NO			
If yes, Name of Municipality/ Institution													
Type of misconduct/ Disciplinary case finalized													
Award/ Sanction													
Did you resign from your job on or after 5 July 2011, pending the finalization of the disciplinary proceedings? If yes, provide details below or on a separate sheet.						YES				NO			
10. CRIMINAL RECORD													
Have you ever been convicted of any criminal offence involving financial misconduct, fraud, or corruption on or after 5 July 2011? If yes, provide details on a separate sheet.						YES				NO			
If yes, type of criminal act													
Date criminal case finalized													
Outcome/ Judgement													
11.REFERENCES													
SURNAME & INITIALS				RELATIONSHIP TO YOU				TELEPHONE NUMBER (OFFICE HOURS)					
1													
2													
3													
4													
12.DECLARATION													
I hereby declare that all 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 employment contract, if appointed.													
<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>						<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>							
SIGNATURE						DATE							