



**APPLICATION FOR EMPLOYMENT
(ACADEMIC/ PROFESSIONAL/ADMINISTRATIVE POST)**

IMPORTANT NOTES

1. Please complete all relevant sections of this form
2. Please supply the following documents:
 - a) Curriculum Vitae
 - b) Certified copies of educational qualifications
 - c) Certified copy of an I.D book
 - e) Copy of a latest Payslip
3. It is essential that the application form is completed in full
4. Return the completed application form and relevant documents to the Department of Human Resources and Development at the above address or email to: hr@mut.ac.za
6. Complete a separate application form for each application

1. GENERAL

Title:
Surname:
First names:
Post applied for:
Department:
Are you willing to be considered for a post in a lower rank? YES/NO (Make a cross) If no please furnish reason/s:
Are you now also applying for another post here? If so, please furnish particulars:
Vacancy: Department:
If you have applied for a vacancy at the University before, please furnish details:
Were you interviewed? YES/NO:
Date of interview:
Vacancy:

2. PERSONAL DETAILS

Home Address:.....
Code:.....
 Postal Address:.....
Code:.....
 Telephone: Home:..... Work:..... Cell:.....
 E-mail address:
 Home Language:.....ID Number:.....
 Age:.....Marital Status:.....

3. FOR EMPLOYMENT EQUITY PURPOSES

(Please mark X where appropriate)

Race:	African	White	Coloured	Indian	Gender:	Female	
						Male	
Are you a South African Citizen?			Yes	No	If no, state Nationality:		
Disability Status	Do you have any disability you would like to declare?					YES	NO
	Is the nature of your impairment physical or mental			Physical		YES	NO
				Mental		YES	NO
				combination of both		YES	NO
	Is the nature of your impairment temporal or permanent			Temporal		YES	NO
Permanent				YES	NO		
Is the nature of your impairment substantially limiting					YES	NO	
If your impairment is substantially limiting, will you need support to perform the essential functions of your job should you be appointed?					YES	NO	

4. DEPENDANTS

NAME	AGE	RELATIONSHIP	DATE OF BIRTH

4. (a) RELATIVES

Kindly state if you have any relatives working at Mangosuthu University of Technology:

Name:.....

Relationship:.....

Position

held:.....

4 (b) KNOWLEDGE OF LANGUAGE

(Please mark X in the appropriate column)

P = POOR A = AVERAGE G = GOOD

	ENGLISH			ISIZULU			AFRIKAANS			OTHER		
	P	A	G	P	A	G	P	A	G	P	A	G
Read												
Write												
Speak												

5. DETAILS OF CURRENT CONDITIONS OF SERVICE

Name of present employer.....

Your present occupational title.....

Your present basic salary per annum R.....

Salary range.....

Financial Annual Fringe

Benefits.....

1) R.....

2) R.....

3) R.....

Total..... R.....

What is the minimum starting salary you will consider R.....

Current incremental date.....

Which pension fund are you a member?.....

Present period of notice.....

Earliest date on which duties can be assumed.....

State any contractual liability towards present employer (nature, amount, commitment period etc)

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6. QUALIFICATIONS (including highest school standard)

*** Kindly attach an HSRC or SAQA Evaluation Certificate with all non- South African qualifications*

DIPLOMA / CERTIFICATE	INSTITUTION	SUBJECTS	YEAR

**Full time study should be indicated by an 'F and Part-time study by a 'P*

7. PROFESSIONAL EXPERIENCE (e.g. C.A. Notary, CIS)

QUALIFICATION	PROFESSIONAL BODY	YEAR	MONTH

8. PROFESSIONAL REGISTRATION

e.g. SA Medical and Dental Council, Public Accountants' and Auditors' Board. Furnish details of Registration by statutory boards or councils only.

CATEGORY OF REGISTRATION	REGISTERING BODY	DATE OF REGISTRATION

9. OCCUPATIONAL EXPERIENCE

(Listed in reverse chronological order)

NAME OF EMPLOYER	CAPACITY AND TYPE OF WORK	FROM		TO	
		YEAR	MONTH	YEAR	MONTH

10. PUBLICATIONS

(Attach separate sheet if space not sufficient)

Note: this section is compulsory if you are applying for an academic post.

A. Authorship or co-authorship of book/s (Please state title, publisher and date)
B. Contributions to scientific professional journals (Please furnish title of contribution, name, year and volume of journal and, if possible, page reference)
C. Important unpublished reports and memorandums

11. MEMBERSHIP OF PROFESSIONAL AND SCIENTIFIC ORGANIZATIONS

Please furnish details of your membership of scientific organizations. Please state whether you hold or held office in any of these organizations e. g. President, Secretary, Treasure

12. ADDITIONAL INFORMATION

Please furnish any additional information which you regard as important in support of your application e.g. experience, bursaries, awards, awards, extraordinary achievements, special knowledge and abilities.

13. REFEREES

Please furnish particulars of three referees, two of who should be former employers.

NB: Please take great care in recording the correct addresses of references.

NAME	CAPACITY	EMAIL ADDRESS	TEL/CELL NO.

Please indicate in which Newspaper you read the advertisement for this post:

PLEASE NOTE: *Employees who are transferring from another institution would be required to make arrangements for one of the following.*

- 1. their leave to be paid out to them on resignation from the previous employer or*
- 2. their institution to transfer the monetary value of the leave entitlement to Mangosuthu University.*

DECLARATION OF APPLICANT

I declare that the particulars furnished by me on this form are true and correct

DATE:..... **SIGNATURE:**.....