

ANNEXURE C

APPLICATION FORM FOR EMPLOYMENT OF SENIOR MANAGER IN TERMS OF GOVERNMENT GAZETTE NO. 37245 OF 17 JANUARY 2014

TERMS AND CONDITIONS

- 1. The purpose of this form is to assist a municipality 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 municipalities to expedite recruitment and selection processes.
- 4. 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.
- 5. 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	ADVERT	ISED POST	r (as refle	ected in the	advert)				
Advertised post applying for									
Reference number									
Name of Municipality									
Notice service period									
Language Proficiency	Afrikaar	าร		English			Other.		
	Good	Average	Poor	Good	Average	Poor	Good	Average	Poor
Read/Speak/Write									
Read/Speak/Write									
Read/Speak/Write									
Drivers Licenses	Yes			No:			Code:		
B. PERSONAL DETA	AILS			1					
Surname									
First names									
ID or Passport Number									
Race	African		Co	oloured	Indian		White		
Gender					Fema	le	Male		
Do you have a disability?					Yes		No		
If yes, elaborate									
Are a South African citizen?					Yes		No		
If no , what is your									
Nationality? Work Permit Number (if									
any) : De yeu held env pelitical off		litical party	whathar		nont tomo		No		
Do you hold any political office in a political party, whether in a permanent, temporary or No acting capacity? If yes, provide information below.									
Political Party:	Position	n:			Expir	y date:			
Do you hold a professional membership with any professional body? If yes , provide information below Yes									

	Professional Body: Me	lembership Number:	Expir	y date:
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C. CONTACT DETAILS					
Preferred language for					
correspondence?					
Telephone number during office					
hours					
Preferred method for	Post	E-mail		Fax	
correspondence (Mark with an X)					
Correspondence contact details (in					
terms of above)					
D. QUALIFICATIONS (Additional info	rmation may be provided o	n your CV)			
Name of School / Technical College	Highest Qualification Obtained		Year Obtained		
Name of Institution	Name of Qualification		NQF Level		Year Obtained

E. WORK EXPERIENCE (Additional information may be provided on your CV)						
Employer (starting with the most recent)	Position	From		То		Reason for leaving
		MM	YY	MM	YY	
If you were previously employed in Local Government, indicate whether any condition exists that prevents your re-employment:			Yes		No	
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	Yes	No
finalisation of the disciplinary proceedings? If yes, provide details		
on a separate sheet		

G. CRIMINAL RECORD		
Were you convicted of a criminal offence involv	ing Yes	No
financial misconduct, fraud or corruption on or a	after 5 July	
2011? If yes, provide details on a separate she	eet	
If yes, type of criminal act		
Date criminal case finalised		
Outcome / Judgement		

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 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 my employment contract, if appointed				
Signature:	Date:			
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