

## Application Internship

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WHAT IS THE PURPOSE OF THIS FORM	A. THE ADVERTISED POST									
To assist a government department in selecting a person for an advertised post.	Position for which (as advertised)	Department where the position was advertised  HUMAN SETTLEMENTS								
This form may be used to identify candidates to be interviewed. Since all applicants cannot be interviewed, you need to fill in this form completely, accurately and legibly. This will help to process your application fairly.	Reference (as stat	If you are offered the position, when can you start <b>OR</b> how much notice must you serve with your current employer?								
WHO SHOULD COMPLETE THIS FORM										
Only persons wishing to apply for an advertised position in a government department.	B. PERSONAL INFORMATION									
ADDITIONAL INFORMATION	Surname									
This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.	First Names									
	Date of Birth									
	ID number <sup>2</sup>									
SPECIAL NOTES	Race <sup>3</sup>	African	Wł	nite	C	oloured	Indian			
<ul> <li>1 - All information will be treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details must correspond with the details in your ID or passport.</li> <li>2 - Passport number in the case of non-South Africans.</li> <li>3 - This information is required to enable the department to comply with the Employment Equity Act, 1998.</li> </ul>	Gender <sup>3</sup>				F	EMALE	MALE			
	Do you have a disability? <sup>3</sup>					YES	NO			
	Are you a South African Citizen?					YES	NO			
	If no, what is your Nationality									
	And do you have a valid work Permit?					YES	NO			
	Have you ever been convicted of a criminal offence or been dismissed from employment? 4					YES	NO			
	If your profession or occupation requires State or official									
4 - This information will only be taken into account if it directly relates to the requirements of the position.	registration, provide date and particulars of registration.									
5 - Applicants with substantial qualifications or work experience	C. HOW DE WE CONTACT YOU									
must attach a CV.	Preferred language for correspondence?									
	Telephone number during office hours									
	Preferred method for correspondence			Post		E-mail	Fax			
	Correspondence details (in term	e contact	e)							
	-					-				

D. LANGUAGE PROFICIENCY - state 'good', 'fair' or 'poor'												
		Languages (specified)										
Speak												
Read												
Write												
E. QUALIFICATIONS <sup>5</sup> (please ignore if you have attached a CV with these details												
Name of School / Technical College			Highest o	Year Obtained								
7	ertiary educ	ation (comple	ete for each o	qualifica	tion you obtai							
Name of Institution			Nam	e of Qual	Year Obtained							
Current study (institution and qualification)												
F. REFERENCES (please ignore if you have attached a CV with these details)												
	Name	Rel	ationship to y	/ou	Tel. No. (d	(office hours)						
DECLARATIO												
I declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information supplied												
could lead t	o my applicat	ion being disq	ualified or m	y dischar	ge if I am appo	inted.						
Signature:	ignature:				Date:							
			I									