

Cape St Francis Hankey Humansdorp Jeffreys Bay Loerie Oyster Bay Patensie St Francis Bay Thombill

POSITION APPLIED FOR : \_\_\_\_\_

Postal: PO Box 21, Jeffreys Bay, 6330 Tel: 042 200 2200 / 042 200 8300

Fax: 042 200 8606

Email: registry@kouga.gov.za Website: www.kouga.gov.za

## **APPLICATION FORM**

1.	DII	DIRECTIONS					
	a.	This form must be completed in your own handwriting. Any false statements made will render a successful candidate liable for instant dismissal.					
	<ul> <li>Any person canvassing with a view to being appointed to a post in this EPWP Programme shall not be considered for an appointment.</li> </ul>						
	c. It is hereby recorded that the applicant will on successful application participate of the EPWP Programme and shall not be an employee of the Municipality.						
2.	PE	RSONAL PARTICULARS					
	Titl	le : Surname :					
	Fu	Il names :					
	Ad	dress:					
	Те	lephone (Home) :(Work) :					
	No	of dependants : Ages :					
	Are	e you a SA Citizen? Identity No.:					
3.	FO	FOR AFFIRMATIVE ACTION AND EQUITY PURPOSE :					
	Race Group :						
	An	y physical disabilities? YES NO					
	If y	ves, specify:					



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4. QUALIFICA	ATIONS			
a. School edu	cation			
Highest stand	ard passed			Date (year) :
Subjects pass	ea:			The state of the s
b. Special Ski	II (Plumbing,	welding, Mo	otor Mechanic, Pai	nting, Bricklaying etc) :
·				
				and the second s
			f.	
5. LANGUAG	E PROFICIE	ENCY	(A)	
	SPEAK	READ	WRITE /	
ENGLISH	SPEAR	KEAD	VVIII	
AFRIKAANS				
XHOSA				Answer "Yes" or "No"
OTHER				Answer Yes or No
I declare that t	he informati	on given by	me is true and co	rrect. I further authorise the Kouga
Municipal Cour	ncil, or its rep	oresentative	s, to verify the information	mation and qualifications stated on tion be required
uns ioiii, as we	as my cre	uit status, s	Todia Saori Illioillia	active to
DATE			-	SIGNATURE