



# INXUBA YETHEMBA MUNICIPALITY

## APPLICATION FOR EMPLOYMENT

### CONFIDENTIAL

**PLEASE NOTE:**

- (a) Complete form in own handwriting with a black pen.
- (b) A separate application form is required should you apply for more than one position.
- (c) Certified copies of relevant educational qualifications/certificates should be attached.
- (d) All questions must be answered in full. This also applies to employees of the Inxuba Yethemba Municipality.
- (e) Incomplete or incorrect information could disqualify an applicant.
- (f) Canvassing for appointment will disqualify the applicant.
- (g) If currently employed by the Inxuba Yethemba Municipality, please indicate your personnel number.

**PLEASE NOTE:**

**INTERNAL APPLICANTS: PERSONNEL NO:** .....

Position applied for:		Ref.no.	
-----------------------	--	---------	--

**PERSONAL PARTICULARS:**

Title:	Mr / Mrs/Ms Other: .....	Surname:	.....								
First names (in full): .....			Known as: .....								
Residential address: .....			Postal address: .....								
Postal code: .....			Postal code: .....								
Contact numbers:			Home	Work	Cell						
Kindly furnish the name of an alternative contact person in the event of you not being attainable at the above numbers:											
Name: .....			Contact no. ....								
Are you a South African citizen? YES/NO			Date of birth: .....			Identity number					
Home language:											
Language proficiency			Afrikaans			English			Isi-Xhosa		
Mark with X			Good	Fair	Weak	Good	Fair	Weak	Good	Fair	Weak
Write											
Read											
Speak											
Understand only											
Other languages:											
Are you in possession of a driver's license?			YES	NO	Date issued: .....			Type: .....			
Have you ever been convicted of a criminal offence which may impact on the post you are applying for? (Mark with X)									Y	N	
Have you ever been found guilty of a disciplinary offence? If "Yes", please state kind of offence and date. (Mark with X)									Y	N	

**EMPLOYMENT EQUITY MONITORING INFORMATION:**

This information is required to enable the Municipality to comply with the requirements of the Employment Equity Act, 1998

Race: Mark with X	African	Coloured	Indian	White
Gender: Mark with X	Male		Female	
Disability: Mark with X	Yes		No	
If YES, please provide details of disability.....				

**EDUCATION:**

Name of school:		
Place:	Highest standard obtained:	Year:
Subjects passed:		
1. ....	5. ....	
2. ....	6. ....	
3. ....	7. ....	
4. ....	8. ....	

**POST SCHOOL EDUCATION:**

Name of institution and place	Period attended		Qualification obtained:
	From	To	
Subjects passed			
1. ....	5. ....		
2. ....	6. ....		
3. ....	7. ....		
4. ....	8. ....		

**CURRENT STUDIES:**

If you are studying at present, give full particulars:

Name of Institution: ..... Registration date: .....

Qualification registered for (Mention year): .....

**LEARNERSHIP/APPRENTICESHIP:**

Trade qualified in:			Date: .....		
Apprenticeship was completed: .....					
Trade test	Passed	Did not write	Failed	If passed, state contract no.	Date:
				.....	

**RECOGNITION OF PRIOR LEARNING:**

State clearly any relevant knowledge and skills that can be linked to the requirements as advertised:

Knowledge of: .....	Skilled in: .....
.....	.....

Membership of Professional Associations/Institute/Association: .....

Do you have any dependency regarding medication, alcohol, drugs, etc?	Yes / No
Do you have any health problems which could influence your job performance?	Yes / No

**WORKING EXPERIENCE**

Are you presently employed?		YES	NO	Earliest date on which you can assume duties?	
Current/last employer		Position held:		Nature of duties:	
Name: .....		.....		.....	
Address: .....		.....		.....	
Tel no. ....		.....		.....	
Period of service: Van/From: .....		.....		.....	
To/To: .....		.....		.....	
Reason for change: .....		.....		.....	
Previous employer(s)		Position held:		Nature of duties:	
Name: .....		.....		.....	
Address: .....		.....		.....	
Tel no. ....		.....		.....	
Period of service: From: .....		.....		.....	
To: .....		.....		.....	
Reason for change: .....		.....		.....	
Previous employer(s)		Position held:		Nature of duties:	
Name: .....		.....		.....	
Address: .....		.....		.....	
Tel no. ....		.....		.....	
Period of service: From: .....		.....		.....	
To: .....		.....		.....	
Reason for change: .....		.....		.....	

**CONTACTABLE REFERENCES**

	NAME	POSITION	COMPANY	TEL NO
1.				
2.				
3.				

I hereby certify that the abovementioned information is to the best of my knowledge true and correct. I accept that, in the event of my application being successful, any information to the contrary will lead to immediate dismissal. All relevant information to assist in my application has been disclosed.

**SIGNATURE OF APPLICANT:** .....

**DATE:** ...../...../20.....