

# WALTER SISULU LOCAL MUNICIPALITY



WALTER SISULU  
LOCAL MUNICIPALITY  
*Botho Humanity Ubuntu*

## APPLICATION FOR EMPLOYMENT

### DIRECTIONS:

- (a) Complete form in own handwriting with a black pen.  
 (b) Mark the appropriate block with an X.  
 (c) Originally certified copies of certificates and other relevant documents must be submitted with this application.  
 (d) All questions must be answered in full.

Position for which you are applying (as advertised)

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### A. PERSONAL PARTICULARS

Dr		Mr		Mrs		Miss		Other/Specify	
Surname .....		Maiden Name .....							
First Names (in Full) .....									
YY MM DD									
Date of Birth				Identity Number					
Home Language .....					Number of Dependents .....				
Race				African	White	Coloured	Indian		
Marital Status (single, married, divorced, widower, widow) .....									

<b>Permanent Postal Address:</b>          	<b>Residential Address:</b>          
<b>Code</b> .....	<b>Code</b> .....
Telephone Number: Home (.....)..... Fax (.....).....	Other means of contact if no telephone:   
Work (.....)..... Cell .....	  

E-mail address: .....

**B. LANGUAGE PROFICIENCY: STATE - “GOOD”, “FAIR” OR “POOR”**

LANGUAGE	READ	SPEAK	WRITE

**C. SCHOOL**

Highest Standard Obtained	.....	Year	.....	Academic	Technical	Commence	Practical
Name of School	.....			Place	.....		
Subjects Passed:							
1. ....		5. ....					
2. ....		6. ....					
3. ....		7. ....					
4. ....							

**TERTIARY EDUCATION**

Name of Institution	Period attended From	To	Qualifications
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
Subjects passed (highest level):			
1. ....	6. ....		
2. ....	7. ....		
3. ....	8. ....		
4. ....	9. ....		
5. ....	10. ....		

**APPRENTICESHIP**

Trade qualified in:	.....	Date:	.....
Name of the company where apprenticeship was completed:	.....		

Trade Test	Passed	Did not write	Failed	If passed state:
				Contract No: ..... Date: .....

**FURTHER STUDIES**

Are you studying at the moment or do you intend to?
.....
.....
Particulars: .....

**OTHER TRAINING**

Any other training not yet listed:
.....
.....
.....
Membership of Institute, Association:

.....  
 .....

**D. DRIVERS LICENCES**

Light Vehicle	Heavy Vehicle	Extra Heavy Vehicle	Motorcycle Over 50 cc	Specify .....
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Date Issued: .....

**E. EXPERIENCE**

PRESENT AND PREVIOUS POSITIONS HELD (Start with latest)

Name and Address	Position Held	Immediate Supervisor	Period of Service	Wages/ Salary per	Reason for termination of Service			
1. .... ..... ..... .....	..... ..... ..... .....	..... ..... ..... tel: .....	..... ..... ..... .....	R.....  <table border="1"> <tr> <td>Week</td> <td>Month</td> <td>Year</td> </tr> </table>	Week	Month	Year	..... ..... ..... .....
Week	Month	Year						
2. .... ..... ..... .....	..... ..... ..... .....	..... ..... ..... tel: .....	..... ..... ..... .....	R.....  <table border="1"> <tr> <td>Week</td> <td>Month</td> <td>Year</td> </tr> </table>	Week	Month	Year	..... ..... ..... .....
Week	Month	Year						
3. .... ..... ..... .....	..... ..... ..... .....	..... ..... ..... tel: .....	..... ..... ..... .....	R.....  <table border="1"> <tr> <td>Week</td> <td>Month</td> <td>Year</td> </tr> </table>	Week	Month	Year	..... ..... ..... .....
Week	Month	Year						
4. .... ..... ..... .....	..... ..... ..... .....	..... ..... ..... tel: .....	..... ..... ..... .....	R.....  <table border="1"> <tr> <td>Week</td> <td>Month</td> <td>Year</td> </tr> </table>	Week	Month	Year	..... ..... ..... .....
Week	Month	Year						

Are you employed at present? ..... If no, state period of unemployment: .....

Earliest date on which duties can be commenced? ..... Gross salary required: R ...../year

Do you have any contractual obligations towards your present employer? If so, thus particulars:  
 .....  
 .....

**F. REFERENCES**

Name two (2) persons at your previous employers to whom confidential reference may be made concerning your application:

Name	Address and Telephone number	Occupation
..... ..... .....	..... ..... .....	..... ..... .....
..... ..... .....	..... ..... .....	..... ..... .....
..... ..... .....	..... ..... .....	..... ..... .....

**MARKS WITH AN X IN THE RELEVANT BLOCKS**

(a) Have you ever been dismissed from employment?

 YES

 NO

(b) is there any criminal case pending against you?

 YES

 NO

(c) Is there any disciplinary case pending against you?

 YES

 NO

(d) Do you have any disability?

 YES

 NO

(e) Any other information you would like to declare?

.....  
 .....

.....  
.....

**G. FOR INFORMATION**

- |   |
|---|
| a) If any applicant is invited to an interview at the expense of the Municipality and such applicant, being offered the position, does not accept the appointment, the Municipality will not reimburse the applicant with the travelling and subsistence costs. |
| b) Any person canvassing with a view to be appointed to a post in the Municipality's service shall not be considered for an appointment.  |

**H. DECLARATION**

I hereby declare that all the information provided in this application and any attachments in support thereof is to the best of 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.

<b>YY</b>	<b>MM</b>	<b>DD</b>

Signature: .....