EXTERNAL APPLICATION FORM

COMPLETE THIS FORM IN YOUR OWN HANDWRITING

POSITION APPLIED FOR: ....……….…..

DEPARTMENT:………………………………………………………………………………………..

A.   PERSONAL PARTICULARS:

1.   Title and Surname (Mr/Ms): .... First names: ....…........……… ....……..................

2.   Postal Address: ....Code:..

3.   Residential Address:...

4.   Telephone: Code: .(Home) .... (Work)…..........................…...…… (Cell)..…...............

5.   Identity Number:... .... 6. Drivers Licence Code (s) ....…......................

7.   E-mail Address:……

B.   SCHOOL EDUCATION

1.   Name of School: ....

       Highest Standard: ....Year Passed:...…......

       # PLEASE ATTACH COPY OF SCHOOL CERTIFICATE TO APPLICATION.

C.   TERTIARY QUALIFICATION

1.   NAME OF INSTITUTION: ………………………………………………………………………… Year obtained: ……….

       Highest Degree/Diploma/Certificate obtained: …………………………………………………………NQF Level: ……………

       # PLEASE ATTACH COPY OF DEGREE/DIPLOMA/CERTIFICATE TO APPLICATION

D.   LANGUAGE PROFICIENCY

English: Speak ....   Other: .... Speak ....
           Write ....   Write ....
           Read ....   Read ....

E.   PRESENT EMPLOYER

1.   Name of Employer: ....

2.   Address of Employer: .... Tel. ....

3.   Present Position Held: .... Commencement Date:...

4.   Name and Title of Direct Supervisor: ....

5.   Give brief description of your duties: ....
       ....
       ……

F.   PREVIOUS EMPLOYMENT

1.   Additional Information may be attached.

Name of Employer	From	To	Job title at Employment	Job title at Resignation	Reasons for Termination

2. Indicate any Local Authority experience not indicated in E.1

Name of Local Authority	From	To	Job title at Employment	Job title at Resignation	Reasons for Termination

G. WORK REFERENCES (Indicate with * if may be contacted)

	Name	Address	Tel	Occupation

H. GENERAL

1. Do you have any family (father, mother, son, daughter, brother or sister) working for the Council?
   Please provide details of the relationship:………………………………………………………………………………………

2. Do you have any friend/s working for Council? Please provide details: …………………………………………………………….

3. Provide particulars if you are currently under investigation of have been found guilty of a criminal offence:

   ……

4. Please indicate if you have any disability :   YES   NO

   Please specify ……

5. *I certify that the above particulars are to the best of my knowledge true and correct.*

SIGNATURE ....   DATE ....

 # FAILURE TO ATTACH REQUIRED DOCUMENTS WILL RESULT IN YOUR APPLICATION BEING DISQUALIFIED.

_____

FOR OFFICIAL USE ONLY:

Mr./Ms .... has been appointed with effect ....

 as ....on notch ....

(R...p.a.)

of salary group .... (R.. to R..p.a)

HEAD OF DEPARTMENT : _____   **DATE :** _____