

APPLICATION FORM FOR EMPLOYMENT

PRINCE ALBERT LOCAL MUNICIPALITY

TO BE COMPLETED FOR ALL VACANCIES



Private Bag X53 / 33 Church Street
 PRINCE ALBERT
 6930

INSTRUCTIONS:

1. The purpose of this form is to assist a municipality in selecting suitable candidates for an advertised post.
2. This form must be completed in full, accurately and legibly. All substantial information relevant to a candidate must be provided in this form. Any additional information may be provided on the CV.
3. Candidates shortlisted for interviews may be requested to furnish additional information that will assist municipalities to expedite recruitment and selection processes.
4. All information received shall be treated with strict confidentiality and shall not be used for any other purpose than to assess the suitability of the applicant.
5. This form is designed to assist the municipality with the recruitment, selection and appointment of staff members in terms of the Municipal Systems Act, 2000 (Act No. 32 of 2000)

DETAILS OF THE ADVERTISED POST (AS REFLECTED ON THE ADVERT)

Advertised post applying for	
Reference number	
Name of the Municipality	
Notice service period	

PERSONAL DETAILS

Surname			
First Names			
ID or Passport Number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	African <input type="checkbox"/>	White <input type="checkbox"/>	Coloured <input type="checkbox"/> Indian <input type="checkbox"/> Other <input type="checkbox"/>
Race	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Do you have a disability?	Yes <input type="checkbox"/>	If "YES", please elaborate	
	No <input type="checkbox"/>		
Are you a South African Citizen?	Yes <input type="checkbox"/>	If not, what is your Nationality?	
	No <input type="checkbox"/>	Do you have a valid Work permit?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you hold a professional membership with any professional body?	Yes <input type="checkbox"/>	Name of body	
	No <input type="checkbox"/>	Membership number	
		Expiry date	
Are you in possession of a valid driver's license?	Yes <input type="checkbox"/>	If "YES", please provide license code.	
	No <input type="checkbox"/>		

CONTACT DETAILS			
Telephone number during office hours	()		
Mobile phone number			
Home address			
		Postal code	
Email address			
Preferred language of communication			

QUALIFICATIONS (Please elaborate on your CV)		
Highest educational qualification obtained		
Details of qualification:	School attended	
	Highest grade	
	Year obtained	
Detail of Tertiary Qualification:	Highest qualification obtained	
	Name of Qualification	
	NQF Level	
	Year obtained	

WORK EXPERIENCE (Please elaborate on your CV)						
Employer (starting with most recent)	Post held	From		To		Reason for leaving
		Month	Year	Month	Year	

DISCIPLINARY RECORD					
Have you ever been dismissed for misconduct during the past (10) years?		YES		NO	
If "yes", Name of Municipality/Employer					
Type of Misconduct/Transgression					
Date of Resignation/Disciplinary case finalised/Dismissal					
Award/Sanction					
Have you been accused of an alleged misconduct and resigned from your job pending finalisation of the disciplinary proceedings?		YES		NO	

CRIMINAL RECORD					
Have you been convicted of any criminal offence in a court of law during the past (10) years?		YES		NO	
If "yes", type of criminal act					
Date criminal case finalised					
Outcome/Judgement					

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



REFERENCE CHECKING CONSENT & AUTHORIZATION FORM

Read carefully and completely before signing

CONSENT

I have applied for employment with the Prince Albert Local Municipality and have provided information about my previous employment. My signature below authorizes my former or current employers and references to release the contents of my employment record with their organizations and to provide any additional information that may be necessary for my application for employment to the Prince Albert Local Municipality, whether the information is positive or negative.

I authorize the Prince Albert Local Municipality to investigate all statements made in my application for employment and to obtain any and all information concerning my former/current employment. This includes my job performance appraisals/evaluations, salary history, disciplinary action(s) if any, and all other matters pertaining to my employment history. I knowingly and voluntarily release all former and current employers, references, and the Prince Albert Local Municipality from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Prince Albert Local Municipality.

This form may be photocopied or reproduced as a facsimile, and these copies will be as effective as a release or consent as the original which I sign.

Applicant name and surname: _____

Applicant signature: _____

Date: _____