

MBIZANA LOCAL MUNICIPALITY



APPLICATION FORM FOR EMPLOYMENT

TERMS AND CONDITIONS

1. The purpose of this form is to assist the 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 a CV.
3. Candidates shortlisted for an interview may be requested to furnish additional information that will assist the Municipality to expedite the recruitment and selection process.
4. All information received will be treated with strict confidentiality and will 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 Senior and Middle Managers in terms of the *Local Government: Systems Act, 2000 (Act No 32 of 200)*.

A. DETAILS OF THE ADVERTISED POST (as reflected on the advert)

| | |
|------------------------------|--|
| Advertised post applying for | |
| Reference Number | |
| Notice Service Period | |

B. PERSONAL DETAILS

| | | | | |
|--|---------|----------|--------|-------|
| Surname | | | | |
| First Names | | | | |
| ID/Passport Number | | | | |
| Race | African | Coloured | Indian | White |
| Gender | | | Female | Male |
| Do you have any disabilities | | | Yes | No |
| If yes, elaborate | | | | |
| Are you a South African citizen | | | Yes | No |
| If no what is your nationality | | | | |
| Work Permit Number (if any) | | | | |
| Do you hold any political office in a political party, whether in a permanent, temporary Or acting capacity. If yes, provide information below | | | | |

| | | |
|--|----------------|--------------|
| Political Party: | Position: | Expiry date: |
| Do you hold a professional membership with a professional body? If yes, provide Information below: | | No |
| Professional Body: | Membership No: | Expiry Date: |

| | | | |
|--|-----|-------|------|
| C. CONTACT DETAILS | | | |
| Preferred language for correspondence: | | | |
| Telephone number during office hours: | | | |
| Preferred method for correspondence | SMS | Email | Post |
| Correspondence contact details | | | |

| | | | |
|--|-----------------------|---------------|---------------|
| D. QUALIFICATIONS (Additional information may be provided on your CV) | | | |
| Name of School | Highest Qualification | Year Obtained | |
| Name of the institution | Name of qualification | NQF Level | Year Obtained |
| | | | |
| | | | |

| E. WORK EXPERIENCE (Additional information may be provided on your CV) | | | | | | |
|---|----------|------|----|-----|----|--------------------|
| Employer (starting with With the most recent | Position | From | | To | | Reason for leaving |
| | | MM | YY | MM | YY | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| If you previously employed in Local Government, indicate Whether any condition exists that prevents your re-employment: | | | | Yes | | No |
| If yes, provide the name of the employing municipality | | | | | | |

| | | |
|--|-----|----|
| F. DISCIPLINARY RECORD | | |
| Have you been dismissed for misconduct? | Yes | No |
| If yes, name of Municipality/Institution | | |
| Type of misconduct/transgression | | |
| Date of resignation/disciplinary case finalised | | |
| Award/Sanction | | |
| Did you resign from your job pending the finalisation of the disciplinary proceedings? If yes provide details on a separate sheet. | | |

| G. CRIMINAL RECORD | | |
|--|------------|-----------|
| Were you convicted of a criminal offence involving financial misconduct, fraud or corruption? If yes, provide details on a separate sheet. | Yes | No |
| If yes, type of criminal act | | |
| Date criminal act was finalised | | |
| Outcome/Judgement | | |

| H. REFERENCE | | | | |
|---------------------|--------------|--------------------|---------------|--------|
| Name of referee | Relationship | Tel (office hours) | Cellphone No. | E-mail |
| | | | | |
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| I. 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 employment of contract, if appointed. | |
| Signature: | Date: |