



**NKOMAZI LOCAL MUNICIPALITY
APPLICATION FORM**

<p>WHAT IS THE PURPOSE OF THIS FORM</p> <p>To assist the municipality in selecting a person for an advertised post.</p> <p>This form may be used to identify candidates to be interviewed. Since all applicants cannot be interviewed, you need to fill in this form completely, accurately and legibly. This will help to process your application fairly.</p> <p>WHO SHOULD COMPLETE THIS FORM</p> <p>Only persons wishing to apply for an advertised position of the municipality.</p> <p>ADDITIONAL INFORMATION</p> <p>This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.</p> <p>SPECIAL NOTES</p> <ol style="list-style-type: none"> All information will be treated with confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details your ID or passport Passport number in the case of non-South Africans. This information is required to enable the municipality to comply with the employment Equity Act, 1998. This information will only be taken into account if it directly relates to the requirements of the position. Applicants with substantial qualification or work experience must attach a C 	A. THE ADVERTISE POST				
	Position for which you are applying (as advertised)		Department where the position was advertised		
	Reference number (as stated in the advert)		If you are offered the position, when can you start?		
	B. PERSONAL INFORMATION				
	Surname				
	First Name				
	Date of Birth				
	ID number ²				
	Race ³	African	White	Coloured	Indian
	Gender ³		FEMALE		MALE
Do you have a disability? ³		YES		NO	
Are you a South African?		YES		NO	
If no, what is your Nationality					
And do you have valid work permit?		YES		NO	
Have you ever been convicted of a criminal offence or been dismissed from employment? ⁴		YES		NO	
If your profession or occupation requires State or official registration, provided date and particulars of registration.					
C. HOW DO WE CONTACT YOU					
Preferred language for correspondence?					
Telephone number during office hours		()			
Preferred method for correspondence	Post	E- mail	Fax		
Correspondence contact details (in terms of above)					

A. LANGUAGE PROFICIENCY – state “good”, “fair” or “poor”

	Language (specified)					
Speak						
Read						
Write						

B. QUALIFICATION 5 (please ignore if you have attaché a CV with these details)

Name of School/Technical College	Highest qualification obtain	Year obtained
Tertiary education (complete for qualification you obtained)		
Name of Institution	Name of Qualification	Year Obtained
Current study (institution and qualification)		

C. WORK EXPERIENCE (please ignore if you have attaché a CV with these details)

Employer (including current employer)	Post held	From		To		Reason for leaving	
		MM	YY	MM	YY		
If you were previously employed in Nkomazi Municipality, indicate whether any condition exists that prevents you re-employment						YES	NO
If yes, provide the name of the previous positions department							

D. REFERENCES

Name	Relationship to you	Tel. No. (office hours)

DECLARATION

I declare that all the information provided (including any attachments) is completed and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being disqualified or may discharge if I am appointed.

Signature _____ Date _____

FOR OFFICE USE ONLY

Appointed as: _____ From: _____

Salary Scale: _____ Notch; _____

Remarks: _____

Appointment recommended/not recommended: _____ Date: _____

Appointment approved: Head of Department: _____ Date: _____

Municipal Manager: _____ Date: _____