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### APPLICATION FOR EMPLOYMENT

POSTION APPLIED FOR:  GRADE:

UNIT:

VACANCY CIRCULAR NUMBER:  JOB REFERENCE NUMBER:

HAVE YOU EVER BEEN DISMISSED FROM ANY EMPLOYMENT?

DOES YOUR QUALIFICATION MEET THE ESSENTIAL REQUIREMENTS?

DOES YOUR WORK EXPERIENCE MEET THE ESSENTIAL REQUIREMENTS?

ARE YOU LEGALLY ELIGIBLE TO WORK IN SA?

Title:  Surname:  First Names:

Date of Birth:  ID Number:

Residential Address:

Postal Code:

Home Phone No:  Work Phone No:  Cell No:

Driver's License:   N License Code:

E-Mail:

#### 2. EDUCATION DETAILS:

QUALIFICATION/TRADE NAME	NAME OF INSTITUION	YEAR OBTAINED	
		FROM	TO

ADDITIONAL TRAINING RECEIVED

**3. EQUAL OPPORTUNITIES:**

For purposes of complying with the Employment Equity Act of 1998 please tick the applicable boxes						
African	Indian	Coloured	White	Disabled	Male	Female

**4. WORK EXPERIENCE:**

If already employed by the Municipality state:

Service No:

Present position:

Present Grade:

If not in the employ of EThekwini Municipality:

NAME OF EMPLOYER	POSITION	PERIOD		REASON FOR LEAVING
		FROM	TO	

Detail your relevant experience for this position as concisely as possible (If considered necessary, attach a separate statement setting out the information in greater detail):

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**5. REFERENCES:**

Referee Name	Company	Position/ Relationship	Contact Details

**6. CRIMINAL RECORDS:**

Have you ever been convicted of a criminal offence?

Criminal Conviction Details:

**DECLARATION:**

I certify to the best of my knowledge that the information I have provided on my application form is true and accurate. In addition, I hereby authorise eThekwini Municipality to approach my current/previous employers, educational institutions, and/or licensing boards for the purpose of obtaining/confirming job-related references or information. I further understand that any misrepresentation or omission of any material fact on my application may result in my disqualification or constitute grounds for dismissal.

Date

Signature