

1 ETHEKWINI MUNICIPALITY

APPLICATION FOR EMPLOYMENT

POSITION APPLIED FOR: GRADE:

SERVICE UNIT/DEPARTMENT:

VACANCY CIRCULAR NO.: or PUBLIC ADVERTISEMENT DATED:

1. PERSONAL (BLOCK LETTERS)

Surname Mr/Mrs/Miss/Ms.....

First Names..... Contact Telephone Numbers: Bus:Res:.....

Residential Address	Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Postal Address.....	Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Age..... years	Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Do you have any relatives employed in the Municipality?

Name: Post/s Occupied

For purposes of complying with the Employment Equity Act of 1998 please tick (✓) the applicable boxes						
African	Indian	Coloured	White	Disabled	Male	Female
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Nationality	Identity No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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2. HEALTH

Indicate state of health.....

Give details of any serious operation, illness or disability which could be relevant to the job applied for:

3. WORK EXPERIENCE

A. If already in the employ of the Municipality state:	Service No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Present Service Unit Department

Present Position Present Grade

Date Appointed to Present Grade	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Length of service with Municipalityyears, months. Date entered service	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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B. If not in the employ of the Municipality:									
Name of present employer	Since:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Position Held

Present basic salaryAll owances.....

Details of previous positions held. (Attach copies of certificates of service in support, or state if such certificates may be obtained).

Employer	Position	Period						Reason for Leaving	Cert. Of Service Held Yes/No
1)									
2)									
3)									
4)									

C. Have you previously been employed by any Municipality? Department.....

If so, state period from								To								Employee No						
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D. Are you or any member of your family a member of a close corporation, partnership, company or involved in any other business activity? YES/NO..... If yes, please state details

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4. QUALIFICATIONS

a) Educational

(i) School Standard Passed

**Photostat copy or statement listing subjects and marks/symbols to be attached.*

(ii) Details of Degree(s)/Diploma(s)/Certificate(s) held

Nature of Degree/diploma/Certificate Date Obtained Where obtained

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b) Proficiency in Languages	Speak	Read	Write	Examinations Passed
1) English				
2) isiZulu				
3) Other				

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

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6. Have you ever been (a) Convicted of a Criminal Offence?

(b) Dismissed or requested to resign from any employment?

7. Driver's Licence Held

Heavy/Light Type Auto or Manual Code Licence No. Is Licence Endorsed Yes/No

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8. ANSWER ONLY IF FOR ARTISAN VACANCY OR IF ARTISAN QUALIFICATION REQUIRED:

(a) Have you served an apprenticeship in the trade in which you now seek employment? (Answer Yes or No)

Trade	With whom Apprenticeship served	Registration No. of Indentures
Apprenticeship served from		To

I hereby make application for appointment to the position indicated in the service of the Municipality and certify that my answers to the questions set out above are correct in every detail. I understand that false or misleading information/details may constitute grounds for dismissal.

Date:

SIGNATURE:

DO NOT ATTACH ORIGINAL CERTIFICATES - COPIES ONLY

FOR USE BY HEAD OF DEPARTMENT ONLY.....

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(This form is available in isiZulu)