**INKOSI LANGALILBALELE MUNICIPALITY**

**PO BOX 15, ESTCOURT, 3310**

**TEL: 036-342 7800**

**FAX: 036 352 5829**



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**APPLICATION FORM FOR EMPLOYMENT**

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 the Municipality to expedite recruitment and selection processes.**
4. **All information received will be treated with strictly confidentiality and will not be used for any purposes than to assess the suitability of the applicant.**
5. **This form is designed to assist Municipality with the recruitment, selection and appointment of senior managers in terms of the Local Government: Municipal Systems Act, 2000 (Act No 32 of 2000).**

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| 1. **DETAILS OF THE ADVERTISED POST (As reflected in the advert)** | | | | | | | | | | | | | | |
| Advertised Post Applying for | | |  | | | | | | | | | | | |
| Reference Number | | |  | | | | | | | | | | | |
| Name of the Municipality | | |  | | | | | | | | | | | |
| Notice service period | | |  | | | | | | | | | | | |
| 1. **PERSONAL DETAILS** | | | | | | | | | | | | | | |
| Surname |  | | | | | | | | | | | | | |
| First Name(s) |  | | | | | | | | | | | | | |
| ID Passport Number |  | | | | | | | | | | | | | |
| Race | African | | | Coloured | | | | Indian | | | White | | | |
| Gender | Male | | | | | | | Female | | | | | | |
| Do you have a disability | | | | | | | | Yes | | | | No | | |
| If yes, please elaborate | | | | |  | | | | | | | | | |
| Are you an SA 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 any professional body? if yes, provide information below | | | | | | | | | | | | | | |
| Professional Body: | | | | | | Membership No: | | | | | | Expiry Date: | | |
| 1. **CONTACT DETAILS** | | | | | | | | | | | | | | |
| Preferred language for correspondence | | | | | | |  | | | | | | | |
| Telephone No. during office hours | | | | | | |  | | | | | | | |
| Preferred method for correspondence | | | | | | | Post | | | E-Mail | | | | Fax |
| Correspondence contact details (in terms of the above) | | | | | | |  | | | | | | | |

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| 1. **QUALIFICATIONS (additional information may be provided on your CV)** | | | | |
| Name of School/Technical College | | Highest qualification Obtained | | Year Obtained |
|  | |  | |  |
| Name of Institution | Name of Qualification | | NQF Level | Year Obtained |
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| 1. **WORK EXPERIENCE (Additional information may be provided on your CV)** | | | | | | | |
| Employer (starting with the most recent) | Position | From | | To | | Reason For Leaving | |
| MM | YY | MM | YY |
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|  |  |  |  |  |  |  | |
| If you were previously employed in Local Government, indicate whether any conditions exists that prevents your re-employment | | | | | | Yes | No |
| If yes, provide the name of the previous employing Municipality. | | | |  | | | |

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| 1. **DISCIPLINARY RECORD.** | | | | |
| Have you been dismissed for misconduct on or after 05th July 2011? | | Yes | | No |
| If yes, name of the Municipality/Institution: |  | | | |
| Type of Municipality/Transgression |  | | | |
| Date of resignation/disciplinary case finalized |  | | | |
| Award/Sanction |  | | | |
| Did you resign from your job on or after 05th July 2011 pending finalization of the disciplinary proceedings? If yes, provide details on a separate sheet | | Yes | No | |

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| 1. **CRIMINAL RECORD.** | | | |
| Were you convicted of a criminal offence involving financial misconduct, fraud or corruption on or after July 2011. If yes, provide details on a separate sheet | | Yes | No |
| If yes, type of criminal act |  | | |
| Date criminal case finalized |  | | |
| Outcome/Judgment |  | | |

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| 1. **REFERENCES** | | | | |
| Name of Referee | Relationship | Tel. (office hours) | Cell-phone No. | Email |
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| 1. **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 :** |