



APPLICATION FORM FOR EMPLOYMENT

- The purpose of this prescribed form is to assist the municipality in selecting suitable candidates for an advertised post.
- The prescribed 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.
- Candidates shortlisted for interviews may be requested to furnish additional information that will assist the Municipality to expedite recruitment and selection processes.
- All information received shall be treated with strict confidentiality and shall not be used for any other purpose than to assess the suitability of the applicant.
- This prescribed form is designed to assist the municipality with the recruitment, selection and appointment of staff members in terms of the Local Government Municipal Systems Act, 2000 (Act No.32 of 2000).
- By signing the prescribed application form an applicant gives the Municipality the right to process personal information.
- An applicant may lodge a complaint to the information regulator should personal information be processed without their permission.

DETAILS OF ADVERTISED POST (as reflected in the advert)	
Advertised post applying for	
Reference Number	
Name of Municipality	
Notice service period	

PERSONAL DETAILS				
Surname				
First Names				
ID or Passport number				
Gender	Male		Female	
Race	African	White	Coloured	Indian
Do you have a disability?	Yes	No	If yes, elaborate	
Are you a South African citizen?	Yes	No	If not, what is your Nationality?	
			Do you have a valid work Permit	
Do you hold a professional membership with any professional body?	Yes	No	Name of Professional Body?	
			Professional Body Membership Number:	
			Expiry date:	
Do you hold any political office in a political party, whether in a permanent, temporary or acting capacity? If yes, provide information below			Yes or No	
Political Party:			Expiry date:	
Position:				

CONTACT DETAILS	
Telephone number during office hours	()
Mobile phone number	
Postal Address	
	Code:
Email Address:	

PREFERRED LANGUAGE OF COMMUNICATION									
Preferred language of Communication (<i>Please indicate</i>)									
Language Proficiency	Read			Write			Speak		
	Good	Fair	Weak	Good	Fair	Weak	Good	Fair	Weak
English									
Afrikaans									
Xhosa									

QUALIFICATIONS (Please elaborate on your CV)			
Highest educational qualification obtained			
Name of School	Highest Grade	Year Obtained	
Highest tertiary qualification obtained			
Name of institution	Name of Qualification	NQF Level	Year Obtained

WORK EXPERIENCE (Please elaborate on your CV)						
Employer (starting with the most recent)	Position	From		To		Reason for leaving
		MM	YY	MM	YY	
If you were previously employed in Local Government, indicate whether any condition exists that prevents your re-employment.				Yes		No
If yes, provide the name of the previous employing municipality						

DISCIPLINARY RECORD		
Have you been dismissed for misconduct during the past ten (10) years?	Yes	No
If yes, Name of Municipality/Employer		
Type of Misconduct/Transgression		
Date of Resignation/Disciplinary case finalised/ Dismissal		

Award/sanction		
Have you been accused of an alleged misconduct and resigned from your job pending finalisation of the disciplinary proceedings?	Yes	No

CRIMINAL RECORD		
Have you been convicted of any criminal offence in a court of law during the past ten (10) years?	Yes	No
If yes, type of criminal act		
Date criminal case finalised		
Outcome/Judgment		

OTHER			
Are you in the possession of a driver's licence? <i>If Yes, specify Code.</i>	Yes	Code:	No
Do you have another income or business?	Yes	No	
Does this company do business with the Municipality?	Yes	No	
Do you have any family members that are employed by Drakenstein Municipality:	Yes	No	

REFERENCES (Please elaborate on your CV)				
Name of Referee	Relationship	Tel (Office hours)	Cellphone Number	Email

DECLARATION	
<i>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.</i>	
Signature:	Date: