



ANNEXURE C OF GOVT NOTICE: 37245

APPLICATION FORM FOR EMPLOYMENT FOR SENIOR MANAGEMENT POSTS

Terms and Conditions

Advertised post applying for

- 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 C.V
- 3. Candidates shortlisted for interviews may be requested to furnish additional information that will assist municipalities to expedite recruitment and selection processes.
- 4. All information received will be treated strictly with confidentiality and will not be used for any other purpose 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).

A. DETAILS OF THE ADVERTISED POST (AS REFLECTED IN THE ADVERT)

Reference number								
Name of municipality								
Notice service period								
B. Personal Details								
Surname								
First Names								
ID or Passport number								
Race:	African		Coloured		Ind	ian	White	
Gender	Female				Ма	le		
Do you have a disability?	Yes				No			
If yes, elaborate								
Are you a South African 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, Yes No								
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,						Yes	No	
provide information below								
Professional Body : Membership Number :					Expiry date :			

C. CONTACT DETAILS									
Preferred language for corresp	oondence ?								
Telephone number during office	ce hours								
Preferred method for correspo	Post			E-mail		Fax			
Correspondence contact details (in terms of above)									
		I					1		
D. QUALIFICATIONS(ADDITIONAL	INFORMATION MAY BE PROVI	DED ON Y	OUR C	C.V)					
Name of School /Technical	Name of School /Technical Highest Qualification Ol			otained Year Obtained					
	Name of Qualification								
Name of Institution	NQF		IQF	QF Level Y		ear Obtained			
E. WORK EXPERIENCE (ADDITION		1	N YOU	JR C\			1-		
Employer(Starting with the	Position	From		То		1	Reason for leaving		
most recent		MM YY		'	MM	YY			
M	- d in 1 1 O in		la - 4la -			\\\	No.		
If you were previously employed in Local Government, indicate whet condition exists that prevents your re-employment					у	Yes	No		
If yes, provide the name of the	, ,								
previous employing municipali									
previous employing municipali	· · · · · · · · · · · · · · · · · · ·								
F. DISCIPLINARY RECORD									
Have you been dismissed for misconduct on or after 5 July 2011?					Yes No				
If yes, Name of Municipality/Institution									
Type of a Misconduct/Transgre									
Date of Resignation/Disciplina									
Award/Sanction									
Did you resign from your job on or after 5 July 2011 pending							No		
finalisation of the disciplinary p	,	•	on						
a separate sheet									
							1		

G. CRIMINAL RECORD									
Were you convicted of a criminal offence involving financial misconduct, fraud or Yes No									
corruption on or after 5 July 2011? If yes , provide details on a separate sheet									
If yes, type of criminal act									
Date criminal case fina	lised								
Outcome /Judgement									
H. Reference									
Name of Referee Relationship		ship	Tel(Office	Hours) Cell phone Number			er E-Mail		
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 :									