



To assist a government department in selecting a person for an advertised post.

This form may be used to identify candidates to be interviewed. You need to fill in all sections of this form completely, accurately and legibly. This will help to process your application fairly.

### WHO SHOULD COMPLETE THIS FORM

Only persons wishing to apply for an advertised position in a government department.

### ADDITIONAL INFORMATION

This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.

### SPECIAL NOTES

1 – All information will be treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details must correspond with the details in your ID or passport.

2 – Passport number in the case of non-South Africans.

3 – This information is required to enable the department to comply with the Employment Equity Act, 1998.

4 – This information will only be taken into account if it directly relates to the requirements of the position.

5- The Executive Authority shall consider the criminal record (s) against the nature of the job functions in line with internal information security and disciplinary code.

6- The applicant may submit additional information separately where the space provided is not sufficient.

7- Departments must accept certified documents that accompany the application(s) with certification that is up to 6 months, unless the advert prescribes a longer period.

#### Effective 01 January 2021

## **APPLICATION FOR EMPLOYMENT**

### A. THE ADVERTISED POST (All sections of this form are compulsory)

Position for which you are applying (as advertised)	Department where the position was advertised
Reference number (as stated in the advert)	If you are offered the position, when can you start OR how much notice must you serve with your current employer?

### B. PERSONAL INFORMATION<sup>1</sup>

Surname a	nd Full names										
Date of Birth	DD/MM/YY	Identity Number Passport <sup>2</sup> number									
Race <sup>3</sup>	African	White	Colour	ed		In	diar	n	Other		
Gender <sup>3</sup>						Female			Male		
Do you hav	e a disability?					Yes			No		
Are you a S	South African citizer	ו?				Yes			No		
If no, what	is your nationality?										
Do you hav	ve a valid work perm	nit? (only if non-	-South Af	rican	)	١	ſes		No		
(including a	peen convicted or fo an admission of guil ide the details)	ound guilty of a t)? ⁵	criminal c	ffenc	e	١	í es			No	
	re any pending crim vide the details)⁵	inal case again	st you?			١	∕es		No		
Have you ever been dismissed for misconduct from the Public Service? <sup>4</sup>				lic	Yes		No				
If yes (prov	If yes (provide the details) <sup>6</sup>										
Do you have any pending disciplinary case against you? If yes, (provide the details)			١	res			No				
Have you resigned from a recent job pending any disciplinary			ry	١	ſes			No			
proceeding against you? <sup>4</sup> If yes, ( <i>please note that the provisions of the Public Service</i> <i>Act shall apply</i> ).											
Have you been discharged or retired from the Public Service on grounds of III-health or on condition that your cannot be re- employed? <sup>4</sup>				١	res (			No			
Are you conducting business with the State or are you a Director of a Public or Private company conducting business with the State? <sup>6</sup> If yes, (provide the details) <sup>6</sup>			u a ess	١	í es			No			
In the event that you are employed in the Public Service, will you immediately relinquish such business interests?			I	١	í es			No			
Please specify the total number of years of experience you have				ivate ector		Publ	ic Se	ector			
If your profession or occupation requires official registration, provide date and particulars of registration			D	Date		Re	eg. N	10			

# Z83 (81/971431)

8- Each application for employment form must be duly signed and initialed by the	C. CONTACT DETAIL	S AND MEDIUM	OF COMMUNICAT	IONS	
applicant. Failure to sign this form may lead to disqualification of the application during	Preferred language for c	orrespondence			
the selection process.	Method for correspondence	Post	E-mail	Fax	Telephone
	Contact details (in terms of the above)				

D. SOUTH AFRICAN OFFICIAL LANGUAGE PROFICIENCY – state 'good', 'fair', or 'poor'					
			Languages (specify	()	
Speak					
Write or read					

Name of School/Technical College	Name of qualification obtained	Year obtained

F. WORK EXPERIENCE (Also attach a detailed CV) <sup>6</sup>																																																																									
Employer (including current	Post held	Fro	om	То		То		То		То		То		То		То		То		То		То		То		То		То		To		То		Reason f	or leaving																																						
employer)		MM	YY	MM	YY																																																																				
If you were previously employed in the Public Service, is there any condition that appointment			prevent	s your re-	Yes	No																																																																			
If yes, Provide the name of the previo nature of the condition.	us employing department	and indic	cate the																																																																						

G. REFERENCES		
Name	Relationship to you	Tel. No. (office hours)

DECLARATION						
I declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information provided will result in my application being disqualified or disciplinary action taken against me if I am appointed:						
Signature:	Date:					