ANNEXURE C

APPLICATION FORM FOR EMPLOYMENT

TERMS AND CONDITIONS

- The purpose of this form is to assist a municipality in selecting suitable candidates for an advertised post.
- 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.
- Candidates shortlisted for interviews may be requested to furnish additional information that will assist
 municipalities to expedite recruitment and selection processes.
- All information received will be treated with strictly confidentiality and will not be used for any other purpose than to assess the suitability of the applicant.
- 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 AD	VERTISED PO	ST (as re	flected in t	he advert)			
Advertised post applying for							
Reference number	0	TWY STATES	10 1 2 2 2 2 5 E				
Name of Municipality							
Notice service period							

B. PERSONAL DETAILS		er 2000-e					
Surname			-65-Ca 70 (6.00)		60-118-58-57-58-F		
First Names				0 8:30 (0.00 = 0.00			
ID or Passport Number							
Race	African	Coloure	d	Indian	White		
Gender				Female Yes	Male		
Do you have a disability?	No						
If yes, elaborate				Yes			
Are a South African citizen?	No						
If no, what is your							
Nationality?					C163		
Work Permit Number (if any):		us subsettes					
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:	IOW.		Expiry date:	1		
Do you hold a professional m		nv profes:	sional bod	v? If yes, provide	9		
information below	No						
Yes							
Professional Body:	Membership Number: Expiry date:						
C. CONTACT DETAILS							
Preferred language for							
correspondence?							
Telephone number during							
office hours							
Preferred method for	Doot	Doot Foot			_		
correspondence (Mark with an X)	Post		E-mail F		Fax		
Correspondence contact		_					
details (in terms of above)							
Totalio (in territo or aporto)							

D. QUALIFICATIONS	Additional inform	ation may be n	rovide	d on your C	V)						
D. QUALIFICATIONS (Additional information may be provided a Name of School / Technical Highest Qualification Obtained					Year Obtained						
College	,g	, ingricos againmontori obtained									
Name of Institution	Name of Qu	Name of Qualification			vel	Year O	btained				
		·-·									
E MODIC EVERDIENCE (A LEG-11) (A											
Employer (starting with	E. WORK EXPERIENCE (Additional information may be provided on your CV)										
Employer (starting with the most recent)	Position	From	Ϋ́		To		Reason for				
the most recent)	-	IAIIAI	<u> </u>	T IVIIVI	MM YY leaving						
<u> </u>											
If you were previously en	ployed in Local G	Sovernment, ind	icate	Yes	Yes No						
whether any condition ex		your re-employs	ment:								
If yes, provide the name	of					-					
the previous employing											
municipality:											
E DISCIBLIMADY DE	CORD										
F. DISCIPLINARY RECORD Have you been dismissed for misconduct on or after 5 July 2011? Yes No											
If yes, Name of Municipa		un or alter 5 July	2011	7 165	Yes No						
					_		_				
Type of a Misconduct/ Tr						_					
Date of Resignation/ Disciplinary case finalised											
Award/ sanction											
Did you resign from yo				No							
finalisation of the discipl	is		1								
on a separate sheet.											
G. CRIMINAL RECOR	<u> </u>	<u> </u>									
Were you convicted o		aco involvina	financi	al Yes		No					
misconduct, fraud or co						NO					
provide details on a sepa		ici o ddiy 2011	,.	3.							
If yes, type of criminal act											
Date criminal case finalised											
Outcome/ Judgment											
H. REFERENCE											
Name of Referee Re	lationship	Tel (office hou	rs)	Cellphone I	Number	Email					
<u> </u>	_					<u> </u>					
I. DECLARATION											
II DESCRIPTION											
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:		Da	ite:								