

G.P.S 81/971431

**APPLICATION FOR EMPLOYMENT**

Effective 01 January 2021

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| **WHAT IS THE PURPOSE OF THIS FORM**  To assist a government department in selecting a person for an advertised post.  This form may be used to identify candidates to be interviewed. Y**ou 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.** |  | **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? | | | | | | | | | | | | | |
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| **B. PERSONAL INFORMATION1** | | | | | | | | | | | | | | | | |
| Surname and Full names | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| Date of Birth | DD/MM/YY | **Identity Number** |  |  |  |  |  | |  |  |  |  |  |  |  |  |
| **Passport2**  **number** |  |  |  |  |  | |  |  |  |  |  |  |  |  |
| Race**3** | ***African*** | ***White*** | ***Coloured*** | | | | | ***Indian*** | | | | ***Other*** | | | | |
| Gender**3** | | | | | | | | Female | | | | Male | | | | |
| Do you have a disability? | | | | | | | | Yes | | | | No | | | | |
| Are you a South African citizen? | | | | | | | | Yes | | | | No | | | | |
| If no, what is your nationality? | | | | | | | |  | | | | | | | | |
| Do you have a valid work permit? (only if non-South African) | | | | | | | | Yes | | | | No | | | | |
| Have you been convicted or found guilty of a criminal offence (including an admission of guilt)? **5**  If yes (provide the details) | | | | | | | | Yes | | | | No | | | | |
|  | | | | | | | | |
| Do you have any pending criminal case against you? If yes, (provide the details)**5** | | | | | | | | Yes | | | | No | | | | |
|  | | | | | | | | |
| Have you ever been dismissed for misconduct from the Public Service?**4** | | | | | | | | Yes | | | | No | | | | |
| If yes (provide the details)**6** | | | | | | | |  | | | | | | | | |
| Do you have any pending disciplinary case against you? If yes, (provide the details) | | | | | | | | Yes | | | | No | | | | |
|  | | | | | | | | |
| Have you resigned from a recent job pending any disciplinary proceeding against you? **4**  If yes, (*please note that the provisions of the Public Service Act shall apply).* | | | | | | | | Yes | | | | No | | | | |
|  | | | | | | | | |
| Have you been discharged or retired from the Public Service  on grounds of Ill-health or on condition that your cannot be re- employed?**4** | | | | | | | | Yes | | | | No | | | | |
| Are you conducting business with the State or are you a Director of a Public or Private company conducting business with the State?**6** If yes, (provide the details)**6** | | | | | | | | Yes | | | | No | | | | |
| In the event that you are employed in the Public Service, will you immediately relinquish such business interests? | | | | | | | | Yes | | | | No | | | | |
| Please specify the total number of years of experience you have | | | | | | | | Private  Sector | | | | Public Sector | | | | |
|  | | | |  | | | | |
| If your profession or occupation requires official registration, provide date and particulars of registration | | | | | | | | Date | | | | Reg. No | | | | |
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| 8- Each application for employment form must be duly signed and initialed by the applicant. Failure to sign this form may lead to disqualification of the application during the selection process. |  | **C. CONTACT DETAILS AND MEDIUM OF COMMUNICATIONS** | | | | | |
| Preferred language for correspondence | | | |  | |
| Method for  correspondence | **Post** | **E-mail** | **Fax** | | **Telephone** |
| Contact details (in terms of the above) |  | | | | |

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

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| **E. FORMAL QUALIFICATION7 (from highest to the lowest)** | | |
| Name of School/Technical College | Name of qualification obtained | Year obtained |
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| Current study (institution and qualification): | | |

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| **F. WORK EXPERIENCE (Also attach a detailed CV)6** | | | | | | | |
| Employer (including current employer) | Post held | From | | To | | Reason for leaving | |
| MM | YY | MM | YY |
|  |  |  |  |  |  |  | |
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| If you were previously employed in the Public Service, is there any condition that prevents your re- appointment | | | | | | **Yes** | **No** |
| If yes, Provide the name of the previous employing department and indicate the  nature of the condition. | | | |  | | | |

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