APPLICATION FOR EMPLOYMENT



GREATER TZANEEN MUNICIPALITY

Tel.: 015 - 307 8000 Fax: 015 - 307 8049

≥ 24, TZANEEN, 0850



1. **DIRECTIONS**

- a Complete form in own handwriting
- b Mark the appropriate block with an X
- c All questions must be answered in full, employees of the Municipality also.

Department :

2. POSITION VACANT

Designation

3. PERSONA	AL PARTICULAI	RS				
Prof	Mr	Ms	Miss		Male	Female
Maiden Name:		Surname:				
Full Names:			I		Language:	
Date of birth:		Age: ID Nr:				
Citizenship:		Population Group:		Number of Dependants:		
Marital State	Single	Married	Divorced		Widower	Widow
Postal Address Tel.		Tel. (Home / Cell)		Other means of contact		
		Tel. (Work / Cell)				
		1			I	

4. LANGUAGE PROFICIENCY

Indicate proficiency as "Good", "Fair", "Poor" or "None"					
Language	Read	Write	Speak	Highest Qualification	
English					
Other:					

5. EDUCATION

School:			Town:		
Highest Grade passed:	Year:	Academically	Technical	Commerce	Practical
Subjects Passed:					
1			6		
2			7		
3			8		
4			9		
5			10	•••••	

6. POST SCHOOL EDUCATION

Name and Place of	Institution	Per	riod	Qualifications Obtained	
		From	To		
Subjects Passed:					
1			6		
2			7		
3			8		
4			9		
_					
Apprenticeship:					
Trade: Date:					
Company where apprenticeship was completed:					
Trade Test	Passed	Date passed	Failed	Did not write	

7. FURTHER STUDIES

Are you studying at the	he moment?	Yes / No	Do you intend to?		es / No		
Details:	Details:						
Any training not yet listed:							
Drivers Licence	Light Vehicle	Heavy Vehicle	Extra heavy vehicle	Motorcycle above 50cc	Other		

8. EXPERIENCE

Present and previous positions held (start with latest)					
Company	Position held	Period	Salary p/m	Reason for termination of services	

9. EMPLOYMENT PARTICULARS

Are you currently employed?	If not, state period unemployed:			
When can you assume duty?	Bruto salary required p/m?			
Do you have any disabilities?	If yes, state the nature of disability:			
Have you previously applied for a position at the Greater Tzaneen Municipality?				
Were you previously employed by this Municipality, if so, furnish particulars:				

10. REFERENCES

Name two persons at your previous employer(s) to whom confidential references may be made.				
Name Number Occupation				

11. GENERAL

Do you have anything else to declare e.g. criminal and/or pending criminal offences, insolvency or dismissals from employment?			
Are you a member of a registered Medical Aid Fund?	Period		
Are you a member of a registered Municipal Pension Fund?	Period		

12. FOR INFORMATION

- a) Certified copies of highest school standard passed, certificates, diplomas or degrees achieved, must be attached.
- b) If an applicant is invited to attend an interview at Tzaneen at the expense of the Municipality and such applicant, being offered the position and later refuses acceptance thereof, the Municipality shall be entitled to claim reimbursement of all travelling and subsistence allowance paid to such an applicant.
- c) The Municipality shall also be entitled to claim advertising expenses from any applicant who has been offered a position, accepts it and later refuses it or does not resume duties.
- d) Any person canvassing with a view to be appointed to a post in the Municipality's service shall not be considered for appointment to such post.

13. DECLARATION

Departmental Head

	articulars are, to the best of ted to the provisions of the Ser			nd accept that if I am appointed, my nd any applicable legislation.
Signature:				
FOR OFFICE USE	ONLY			
Appointment	Promotion	Transfer	Temporary	Job Id No.
Designation:		Department	:	
From:		Notch:		
Salary Scale:				
Job Level:		Days leave:		
Fringe benefits:				
Approved:				

Municipal Manager