



WCED-059

Wes-Kaap Onderwysdepartement
Western Cape Education Department
Isebe leMfundo leNtshona Koloni

DATABASE FOR UNEMPLOYED EDUCATORS

INSTRUCTIONS	
1. All unemployed qualified teachers are requested to complete this form in ink.	
2. Complete only ONE form and answer all the questions.	
3. Please return this form to: Head: Education, Western Cape Education Department, Section Personnel Management (Educators) ☐X9114 Cape Town 8000	

PERSONAL DETAILS		
1. Surname	2. First name	3. Maiden Name
4. Date of birth	5. Identity number	6. SACE Registration number
7. Gender: Male / Female (<i>Cross out which is not applicable</i>)		
8. Nationality:		
9. If you are a foreigner, do you have a working permit? Yes / No (<i>Cross out which is not applicable</i>)		
10. Residential address:		
		Postal Code
11. Tel nr: (Home) ()		(Work) ()
12. Cell nr:		

ACADEMIC AND PROFESSIONAL QUALIFICATIONS			
Qualifications	Year	Name of diploma or certificate	Name of institution that issued the diploma or certificate
Academic			
Professional			
Technical			
Main subjects:			

SUBJECTS AND ACTIVITIES OFFERED (if qualified for senior primary or secondary education, indicate which subjects you are or willing or qualified to offer.)			
Subjects	Grade	Language Medium	Extracurricular activities/Sport

PREVIOUS EXPERIENCE (<i>Indicate previous teaching experience</i>)			
Category	YEAR/MONTH	SUBJECTS	GRADES TAUGHT
College of Education			
Technical College			
Technical School			
Secondary School Gr 8 - 12			
Jun. Secondary Gr 7 - 9			
Sen. Primary Gr 4 - 7			
Jun. Primary Gr 1 -3			
Pre-primary			
Extra space:			

NON TEACHING EXPERIENCE		
Name and address of employer		
	Postal code	
Position held:	Period from:	to

I certify that all the information given above is correct.

Signature Name in print:

Date: