

APPLICATION FOR EMPLOYMENT

Effective 01 January 2021

# **ANNEXURE A**



## 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. 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

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									
Chief Examination Officer	WESTERN CAPE EDUCATION									
Senior Invigilator										
Invigilator										
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?									
NSC / SC 202406 □	your current employer:									
NSC 202411 🗆										

NSC	202411															
B. PERS	SONAL INFORMA	TION <sup>1</sup>														
Surname a	and Full names															
Date of Birth	DD/MM/YY	Identity Number Passport <sup>2</sup>														
Race <sup>3</sup>	African	number White	Co	lou	red			lr	ndia	n		- (	Othe	r		
Gender <sup>3</sup>	ender <sup>3</sup>								Female				Male			
Do you ha	Do you have a disability?								Yes				No			
Are you a South African citizen?								Yes				No				
If no, what	is your nationality?	>														
Do you ha	Do you have a valid work permit? (only if non-South African)								Yes				No			
(including	been convicted or f an admission of gu vide the details)		crimi	nal	offer	nce			Yes				No			
Do you have any pending criminal case against you? If yes, (provide the details) <sup>5</sup>								Yes				No				
Have you ever been dismissed for misconduct from the Public Service? <sup>4</sup>								Yes				No				
If yes (prov	vide the details) <sup>6</sup>															
	ve any pending dis vide the details)	ciplinary case a	gains	t yc	u?				Yes				No			
Have you resigned from a recent job pending any disciplinary proceeding against you? <sup>4</sup> If yes, (please note that the provisions of the Public Service Act shall apply).									Yes				No			
	s of Ill-health or on	n discharged or retired from the Public Service Ill-health or on condition that your cannot be re-								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? <sup>6</sup> If yes, (provide the details) <sup>6</sup>									Yes No							

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application(s) with certification that is up 6 months, unless the advert prescribes longer period.	10 3 a	In the event that you are employed in the Public Service, will you immediately relinquish such business interests?							No				
• •		Please specify the total number of years of experience you have											
	If your profession or occupation requires official registration,							Date	Reg. No				
	provide date and particulars of registration							Date	110g. 140				
8- Each application for employment form m be duly signed and initialed by the application	ust	C. CONTACT DETAILS AND MEDIUM OF COMMUNICATIO											
Failure to sign this form may lead disqualification of the application during	to	Preferr	ed languag	e for corre	esponde	nce							
selection process.		Method	d oondence	for	Post		E-mai	ı	Fax	Telephone			
		Contac	et details (in										
				<u></u>									
D. SOUTH AFRICAN OFFICIAL LA	ANGU	AGE PRO	FICIENCY	– state 'g	good', 'fa	air', or '	poor'						
		Languages (specify)											
Speak													
Write or read													
E. FORMAL QUALIFICATION7 (fro	m hig	hest to th	ne lowest)										
Name of School/Technical College			l	Name of o	qualificati	on obta	ined		Year ol	btained			
Current study (institution and qualifi	cation	):											
1		<i>,</i> -											
F. WORK EXPERIENCE (Also atta	nch a	detailed C	:V) <sup>6</sup>										
Employer (including current employer)	Po	ost held		Fr	om I		То	Reaso	n for leaving				
employer)				MM	YY	MM	YY						
If you were previously employed in	the Pu	ıblic Servi	ce, is there	any cond	ition that	prevent	s your re-	Yes	No				
appointment  If yes, Provide the name of the prevnature of the condition.	ious e	mploying	department	t and indic	cate the								
G. REFERENCES													
Name		Relationship to you					Tel. No. (office hours)						
			NO.	T PPLIC	CABLE								
DECLARATION  I declare that all the information pro	vidad	(including	any attach	mentel ic	complete	and co	arrect to the	host of r	ny knowloda:	Lunderstand			
that any false information provided													
Signature:					Date:								

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