



**Human Resources Section
Corporate Services Department**

P.O. Box 37

Eshowe

3815

TEL: 035 473 3474

FAX: 035 4744733

APPLICATION FOR EMPLOYMENT

Position for which you are applying _____

SECTION I- PERSONAL INFORMATION

Surname _____

Full Names _____

Identity No. _____

Income Tax No. _____

Date of Birth _____

Age _____

Race African

Coloured

Indian

White

Gender Male

Female

Do you have any disabilities?

Yes

No

Are you a South African Citizen?

Yes

No

If No, what is your nationality _____

Do you have a Work Permit _____

SECTION II – CONTACT INFORMATION

(How do we contact you?)

Preferred language for correspondence _____

Preferred method for correspondence

Post

e-mail

Fax

Correspondence details (P.O Box number/e-mail address/fax number) _____

SECTION III – LANGUAGE PROFIECIENCY

Language (specify) – state ‘GOOD,’ ‘FAIR,’ POOR’

Language						
Speak						
Read						
Write						

SECTION IV – EDUCATIONAL INFORMATION

QUALIFICATIONS

1. Last school attended _____

Highest grade passed _____ Year _____

2. Last College /Technikon/University attended _____

3. Certificates/Diplomas/Degrees

	Year acquired	Subject passed

Certified copies (not older than three (3) months) of certificates must be attached to this application form

SECTION V – EMPLOYMENT INFORMATION

Work experience

1. Previous Employment

Name of Employer	Position held	Period of Employment

2. Current Employment

Name of employer	Position	Period of Employment

3. Employment References

Initials and Surname of Person	Company/Employer	Relationship	Contact Number/s

4. Earliest date on which duties can be assumed _____

5. Certificates/ Diplomas/Degrees/Testimonies

Certified copies of the following Certificates/Diplomas/ Degrees are attached hereto:

1. _____
2. _____
3. _____
4. _____
5. _____

SECTION VI - EDUCATIONAL INFORMATION

Do you have any family (father, mother, son, daughter, brother or sister) working for the Council?
Please provide details of the relationship: _____

Do you have any friends working for Council? Please provide details: _____

Any other information _____

SECTION VII - STATEMENT

I the undersigned, hereby solemnly state as follows:

1. That the information stated above is true and correct to the best of my knowledge;
2. That should the above information be wilfully false statement, I am aware that I render myself liable for instant dismissal on proof thereof;
3. That I am aware that I am held responsible for losses which the Council may suffer as a result of my failure to assume duties;
4. That I understand and accept that if I am appointed to the services of uMlalazi Municipality, such appointed shall be subject to the provisions of relevant legislation, the relevant Conditions of Employment, the relevant Code of Conduct, as amended from time to time.

Signature of applicant

Date