



### 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 application(s) with certification that is up to 6 months, unless the advert prescribes a longer period.

#### Z83 (81/971431)

Effective 01 January 2021

## **APPLICATION FOR EMPLOYMENT**

#### 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?

#### B. PERSONAL INFORMATION<sup>1</sup>

		0												
Surname a	nd Full names													
Date of Birth	DD/MM/YY	Identity Number Passport <sup>2</sup> number												
Race <sup>3</sup>	African	White	Co	lour	ed			In	ndia	n	T	0	the	r
Gender <sup>3</sup>				Female				Male						
Do you have a disability?					Yes				No					
Are you a	South African citizer	ו?						`	Yes			No		
If no, what	is your nationality?													
Do you hav	ve a valid work pern	nit? (only if non	-Sout	h Af	rica	ın)		`	Yes		No			
(including a	been convicted or f an admission of guil		a crin	ninal	off	enc	ce -	,	Yes			١	٩٥	
If yes (provide the details) 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>				lic	Yes			No						
If yes (provide the details) <sup>6</sup>														
Do you have any pending disciplinary case against you? If yes, (provide the details)			-	`	Yes			1	٩٥					
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			١	No				
				Yes			١	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			١	٩o				
In the event that you are employed in the Public Service, will you immediately relinquish such business interests?				/ill	,	Yes			1	٩N				
Please specify the total number of years of experience you have			bu	Private Public Sector		: Se	ector							
If your pro	fession or occupat te and particulars of	ion requires o registration	fficial	reg	istra	atio	n,	0	Date	)		Reę	g. N	10
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8- Each application for employment form must be duly signed and initialed by the	C. CONTACT DETAILS	AND MEDIUM	OF COMMUNICAT	IONS			
applicant. Failure to sign this form may lead to disqualification of the application during the selection process.	Preferred language for con	Preferred language for correspondence					
	Method for correspondence	Post	E-mail	Fax	Telephone		
	Contact details (in terms of the above)						

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

Name of School/Technical College	Name of qualification obtained	Year obtained

F. WORK EXPERIENCE (Also attach a detailed CV) <sup>6</sup>							
Employer (including current	Post held	From To		Reason for leaving			
employer)		MM	YY	MM	YY		
If you were previously employed in the Public Service, is there any condition that appointment				prevent	s your re-	Yes	No
If yes, Provide the name of the previo nature of the condition.	us employing department	and indic	cate the				

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

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 disgualified or disciplinary action taken against me if I am appointed:				
Signature:	Date:			