

LESEDI LOCAL MUNICIPALITY APPLICATION FORM FOR EMPLOYMENT

- 1. The purpose of this form is to assist the Lesedi Local Municipality in selecting suitable candidates for advertised posts.
- 2. No applications will be accepted after the stipulated closing date.
- 3. This form must be completed in full, accurately and legibly. All substantial information relevant to a candidate must be provided on this form. Any additional information may be provided on a CV.
- 4. Candidates who are shortlisted for interviews may be requested to furnish additional information that will assist the Lesedi Local Municipality to expedite
- 5. Medical, physical, competency and/or psychometric evaluations, in accordance with applicable legislation, could be prerequisites for appointment.
- 5. All information received will be treated with strict confidentiality and will not be used for any other purpose other than to assess the suitability of the applicant.
- 6. This form is designed to assist the Lesedi Local Municipality with recruitment, selection and appointment of suitable candidates in terms of the Local Government:

A. DETAILS OF ADVERTISED POST (as reflected in advertisement)								
Advertised post being applied for								
Reference number								
Notice service period								
B. PERSONAL DETAILS								
Surname								
First name(s)	1	\ /						
ID or passport number		117						
Race	African	Coloured	Indian	White				
Gender	/	791	Female	Male				
Do you have a disability?			Yes	No				
If yes, elaborate.								
Are you a South African citizen?			Yes	No				
If no, what is your nationality?		11/10						
Work permit number (if any)			_					
Do you hold a professional membership with any professional body? If yes, provide the information below.								
Professional body	Membership number		Expiry date					
	Local Municipality							
C. CONTACT DETAILS								
Preferred language of correspond	lence							
Contact numbers	Cell phone		Alternative number					
Email address (if applicable)								
Residential address								
Postal address (if different)								
D. DRIVER'S LICENCE(S)								
License code(s) (eg C1, EB, etc)								
Expiry date of licence(s)								
Do you have a PDP?			Yes	No				
If yes, indicate the expiry date of the PDP.								

E. QUALIFICATIONS (Ad	ditional informatio	on may be pr	ovided on	your CV.)				
Highest school qualification (grade) completed	Name of school/training institution			Year that qualification was completed				
Highest tertiary/technical qualification obtained	Name of institution			NQF level		Year obtained		
F. WORK EXPERIENCE (Additional informa	ation may be	provided o	on your CV	'.)			
Are you currently employed?				Yes		No		
If yes, supply the name of your countries the period of employment.	urrent employer and							
If currently a Lesedi Local Munic provide your designation and pay								
Other employers	Position	Fro	om	То				
(start with the most recent)		ММ	YY	ММ	YY	Reason for leaving		
			/					
If you were previously employed in local government, indicate whether any condition exists that prevents your re-employment.						No		
If yes, provide the name of the pr where you were employed.	evious municipality	101						
G. DISCIPLINARY RECO	RD							
Have you ever been dismissed fo	Have you ever been dismissed for misconduct on or after 5 July 2011?					No		
If yes, indicate the name of the municipality/institution.								
Type of misconduct/transgression	n							
Date of resignation/disciplinary c	ase finalised							
Award/sanction								
Did you resign from your job on or after 5 July 2011 pending finalisation of the disciplinary proceedings? If yes, provide details on a separate page.						No		
H. CRIMINAL RECORD	Loco	LAATE	sicio	aliti	1	I.		
Were you ever convicted of a criminal offence involving financial misconduct, fraud or					,	No		
If yes, provide the type of criminal act								
Date that criminal case was finalised								
Outcome/judgement								
I. REFERENCE								
Name of referee	Relationship	Telephone nu hours)	mber (office	Cell phone	number	Email address		
J. DECLARATION								
I hereby declare that all the information and correct. I understand the termination of my employment co	hat any misrepresenta							
Signature Signature			Date					