MUSINA LOCAL MUNICIPALITY

Private Bag X611 Musina, 0900 Phone: 015 - 534 6100



APPLICATION FOR A VACANCY

A. Details of the advertised post (as reflected in the advert)

Advertised post applying for	
Notice number	
Name of the municipality	
Notice service period	

	TERMS AND CONDITIONS					
1.	The purpose of this form is to assist a municipality in selecting suitable candidates for an advertised post.					
2.	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 the CV and supported by recently certified copies.					
3.	Candidates shortlisted for interviews may be requested to furnish additional information that will assist municipalities to expedite recruitment and selection processes.					
4.	All information received will be treated with strict confidentiality and will not be used for any other purpose than to assess the suitability of the candidate.					
5.	Shortlisted candidates may be subjected to suitability checks including but not limited to Security Background Checks, Citizenship/Nationality, Qualifications, Criminal Record and Employment History. By singing and submitting the application form, you are giving consent for the Screening and vetting process to take place					
6.	This form is designed to assist the municipality with recruitment, selection and appointment of staff members in terms of the Local Government: Municipal Systems Act, 2000 (Act 32 of 2000)					

B. PERSONAL INFORMATION						
SURNAME						
FIRST NAMES						
IDENTITY OR PASSPORT NUMBER (<u>attach a</u> <u>certified copy)</u>						
RACE	African	Color	ed	Indian	White	
GENDER	Male	Fema	ale			
Do you have a disability?	YES	NO)	Disability - \ elaborate)	res / No (If YES,	
Are you a SA Citizen?	YES	NO)	IF NO, what	is your nationality?	
Do you have a valid work permit?	YES	NO)	IF YES, NUM	NUMBER:	
Do you hold a professional membership wi	th any prof	essiona	l bod	y? If yes, p	rovide information be	low
Professional Body:						
Membership number: Exp			Exp	iry date:		
	C. CO	NTAC	CT [DETAILS	3	
Preferred language of communication						
Telephone number during office hours						
Mobile phone number						
Preferred method for correspondence (mark with X)					Post	Email
Email address:						
Postal address:						
D. EDUCATION						
Name of school attended						
Highest grade:						

Highest Tertiary Qualification obtained?						
Name of institution	Name of qualification	NQF level				

E. EMPLOYMENT RECORD						
Employer	cent) Position held	From		То		
(Starting with the most recent)		Month	Year	Month	Year	

F. DISCIPLINARY RECORD				
Have you been dismissed for misconduct during the past ten (10) years	YES	NO		
If yes, Name of Municipality / Employer				
Type of a Misconduct / Transgression				
Date of resignation / Disciplinary case finalized / Dismissal				
Award / Sanction				
Have you been accused of an alleged misconduct and resigned from your job pending finalization of the disciplinary proceedings?	YES	NO		

G. CRIMINAL RECORD						
Have you been convicted of any criminal offence in a court of law during the past ten (10) years? YES NO						
If yes, type of criminal act.						
Date criminal case finalized						
Outcome / Judgment						

H. REFERENCES (please elaborate on your CV). One referee <u>must</u> be an HR official and one referee <u>must</u> be a direct supervisor who can confirm employment Name of Referee Relationship *Compulsory *Compulsory *Compulsory

I. DECLARATION AND GRANTING OF CONSENT- BY APPLICANT					
	Initial in the block to declare and give consent				
(1) I hereby declare that all the information provided (Including Personal, Academic information and employment history) in this application and any attachments in support thereof is to the best of my knowledge, accurate and up to date.					
(2) Further, I the undersigned confirms that my personal information will be shared with and verified by the duly authorised Verification Information Supplier / designated person and may be further stored and shared with any other legitimate company or body as part of the screening and vetting process.					
(3) I the undersigned understand that the verification process for which I grant consent may include:					
 Credit information verification Verification of the validity of qualifications, certificates and professional body membership where applicable 					
 Employment history verification of current and previous employers Criminal Record verification 					
 Fraud Record verification Misconduct / Disciplinary records verification Citizenship / Nationality and Identity document verification 					
 Driver's license & vehicles (4) I the undersigned understand that any misrepresentation or failure to disclose 					
any substantial information may lead / result in my disqualification or termination of my employment contract, if appointed.					

SIGNATURE DATE