

NGAKA MODIRI MOLEMA DISTRICT MUNICIPALITY

Cnr. Carrington Str and 1st Avenue, Industrial Site, Mahikeng, 2745 | Tel: (018) 381 9400|Fax (018) 381 4300 Private Bag X2167, Mahikeng, 2745| www.nmmdm.gov.za

OFFICE OF THE MUNICIPAL MANAGER

ANNEXURE B APPLICATION FORM FOR EMPLOYMENT

						uitable candidates f							
This form n	2. This form must be completed in full, accurately, and legibly. All substantial information relevant to a candidate must be provided in this form. Any												
additional in	additional information may be provided on the CV. Candidates shortlisted for interviews may be requested to furnish additional information that will assist municipalities, to expedite recruitment and												
Candidates	Candidates shortlisted for interviews may be requested to furnish additional information that will assist municipalities to expedite recruitment and												
selection pr	selection processes.												
 All informat 	All information received shall be treated with strict confidentiality and shall not be used for any other purpose than to assess the suitability of the												
applicant.													
This form is	designed to ass	ist municip	cality with	the recruitn	nent,	selection, and appo	intment of s	staff mei	mbers in te	rms of the N	/lunicipa	al Systems Act, 2	2000
(Act No. 32	,												
DETAILS OF THE AL		ST (as refl	lected in t	he advert)									
Advertised post applyi	ng for												
Reference number													
Name of the Municipal	itv												
rtamo or the manierpa	it.y												
Notice service period													
PERSONAL DETAILS		<u> </u>											
Surname		I											
First Names													
ID or Passport Number	r												
		ļ											
Gender		Male						Female	!				
Race		African				White		Coloure	nd .		Indian		
Race		Airican				vvriite		Coloured			IIIulaii		
Do you have a disabili	tv?	Yes	No	If yes, ela	abora	ate							
,	,			11 700, 010001010									
Are you a South Afric	an Citizen?	Yes	No	If not, wh	If not, what is your nationality?								
-													
				Do you have a valid work Permit?						Yes		No	
Do you hold a profes	oional	No. No. No.				and the state of the state				Manahanahin Euri		Evniny data	
Do you hold a professional		Yes No Name of p			proie	ofessional body						Expiry date	
membership with any professional								Number					
body?													
CONTACT DETAILS													
Telephone number du	iring office hours	3	()									
Mobile phone number													
Mobile priorie number													
Postal address													
									Code:				
Email Address													
5 (!!									_				
Preferred language of	communication												
QUALIFICATIONS ()			CV)										
Highest educational q	ualification obtai	ned.											
Ni of the contract							11:-110			1 3/-	01.1.1		
Name of the School					Highest Grade				Year Obtained				
Highest tertiary qualifi	cation obtained.												
Name of least to the					NI-	me of a gratification		NIC	□ love!	Tv.	or Obt	inad	
Name of Institution Na						ame of a qualification NQF lev			r ievei	el Year Obtained			
								1					



WORK EXPERIENCE (please elaborate	on your CV)								
Employer (starting with the most	Post Held	ror	То		Reason for leaving				
recent)		Month	Year	Month	Year				
DISCIPLINARY RECORD									
Have you been dismissed for misconduct	Yes		No						
during the past ten (10) years?									
If yes, Name of Municipality/ Employer									
Type of a Misconduct/ Transgression									
Date of Resignation/ Disciplinary case									
finalised/Dismissal									
Award/ sanction									
Have you been accused of an alleged in	Yes		No						
proceedings?									
CRIMINAL RECORD									
Have you been convicted of any criminal	offence in a court of law?					Yes		No	ı
during the past ten (10) years?	103		140						
If yes, type of criminal act									
if yes, type of criminal act									
Date criminal case finalised									
Outcome/ Judgment									
REFERENCES (please elaborate on yo									
Name of	Relationship	Tel (office hours	5)	Cell phone N	lumber	Email			
Referee									
		l				1			
DECLARATION									
I hereby declare that all the information									
understand that any misrepresentation of	r tailure to disclose any informa		aisquali	tication or tei	mination c	т ту етр	oyment contra	act, it ap	ppointed.
Signature:		Date:							

