

## Collins Chabane Local Municipality Employment application form

Direction to Candidates:		1. Post details								
1.	Applications on form with	Position applying for:								
	full particulars of the applicants' training, qualifications, skills, competencies, knowledge and experience (on a separate sheet or a CV).	Reference no:								
		2. Personal details								
		First Names								
2.	Applicants must indicate post name and where necessary a reference number of the vacancy in their applications.	Surname								
		Date of Birth								
3.	Applicants requiring additional information regarding an advertised post, must direct their enquiries to Collins Chabane Local Municipality, Corporate Services Department.	ID Number								
		Do you have a drivers' license?	Yes	No	Code:		License No:			
		Gender	Male	Female			Previously Yes aged Individual?		No	
4.	Applications should be forwarded in time to the Municipality since applications received after the closing date will not be accepted.	Are you disabled?	Yes	No	Nature of disability:					
		Are you a Yes South	Yes	No	If no, state your Nationality:					
		African Citizen?			Do you have a valid work permit?			No		
		3. Contact details								
SPECIAL NOTES:		Postal Address								
1.	Collins Chabane Local Municipality Local Municipality subscribes to the principles of National norms and standards relating to employment equity. We assure you that your opportunity for employment with this Municipality depends solely on your qualifications.	E-mail								
		Telephone								
		Cell								
		Fax								
		4. Language Proficiency								
		Language								
2.	Please note that canvassing and lobbying will automatically disqualify your application	Speak								
		Read								
		Write								



- Discotional analidiation								
5. Educational qualifications								
5.1 Tertiary Education								
Name of Institution	Qualifications	Year Obtained						
5.2 Secondary Education								
Highest Standard Passed	Exemption Yes/No	Year Obtained						
	6. Work Experience							
Employer	Position held	Period of Employment						
Limployer	1 osition field	T criod of Employment						
	7. Disciplinary Record							
Have you been dismissed for misconduct on or after 5 July 2011?	Yes	No						
If yes, Name of Municipality/								
Institution: Type of Misconduct/ Transgression								
Date of Resignation/ Disciplinary								
case finalised								
Award/ Sanction								
Did you resign from your job on or	Yes	No						
after 5 July 2011 pending finalisation of the disciplinary proceedings? If								
yes, provide details on a separate								
sheet.	O Contractor al Decesion							
8. Criminal Record								

Were you convicted of a criminal of fraud or corruption on or after 5 J separa	Yes	No			
If yes, type of criminal act					
Date criminal case finalised					
Outcome/ Judgement					
	9. Re	ferences			
Name of Person	Rel	ationship to You	Contact No.		
	10. De	claration			
I declare that all the information provi of my knowledge. I duly authorize educational qualifications, profession consumer credit, criminal record, dr information supplied could lead to m	credential vonal member ivers' license	verification types including ship, employment history and fraud prevention checkens.	g, but are no , employmen cks I understa	ot limited to, t references, and that false	
Signature:		Date:			

Return address: Private bag X9271 Malamulele 0982,

Tel: 015 851 0110; Fax: 015 851 0097