

EMPLOYMENT APPLICATION



These are downloadable documents and can be ELECTRONICALLY edited afterwards

Date:

STAFF DETAILS

Employee's Name:

Income TAX Number:

Home Telephone Number:

Address:
Number & Street, Suburb
City, Postal Code

Gender: ID Number:

Marital Status: Married Single Divorced

Spouse's name:
Spouse ID number:
Spouse's date of birth:
Spouse's cell number:
Anniversary date:

Nationality:

Number of Dependants:

CONTACT INCASE OF EMERGENCY:

Name:

Relationship:

Telephone: Cell:

HEALTH

Are you in good health currently? YES NO

Give details of any illness or injury which could affect your job performance.

LANGUAGE PROFICIENCY

	Speak	Read	Write	Key	
English					Excellent
Afrikaans					Good
Other					Fair
					Poor

QUALIFICATIONS

Highest school qualification:

Post school qualification:

Qualification info	Qualification	Date	Institution

PARTICULARS OF COURSES COMPLETED

If you are currently studying, give full details	Qualification	Date	Institution

EXPERIENCE



PARTICULARS OF PREVIOUS EMPLOYERS

Company Name		
Address		
Position		
Period of Service	From:	Till:
Nature of Duties		
Reason for Leaving		
Salary at Termination		
Contact Person		
Tel:	Cell:	
Email:		

Company Name		
Address		
Position		
Period of Service	From:	Till:
Nature of Duties		
Reason for Leaving		
Salary at Termination		
Contact Person		
Tel:	Cell:	
Email:		

Company Name		
Address		
Position		
Period of Service	From:	Till:
Nature of Duties		
Reason for Leaving		
Salary at Termination		
Contact Person		
Tel:	Cell:	
Email:		

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OFFENCES

Have you every been convicted of a criminal offence?

YES

NO

If the answer to the previous question is "yes" provide the following information.

Nature of Offence	Date	Place where committed	Sentence

BANKING DETAILS

Bank:			
Account Number:			
Branch:		Branch Code:	
Type of Account:			

LEISURE TIME

Participation in clubs, sporting activities and hobbies.

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GENERAL

Do you posses a valid drivers Licence?		Code:	
PDP?			
Have you ever been declared insolvent?			
Earliest date you can assume duty?			
Are you available for transfer to other centres?			
Do you have any contractual or financial liability towards your present employer?			

- I certify that the information contained in this form is true and accurate to the best of my knowledge.
- I understand that false, inaccurate or misleading information may constitute dishonesty which could result in my dismissal.
- I realise that the completion of this application form gives me no right which I do not currently have.

Signature of Applicant: _____ Dated: _____

PLEASE ATTACH COPIES OF YOUR:

- Drivers licence
- PDP
- Passport

- Workers Permit if you are of foreign nationality
- Proof of Address (FICA)

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