

MAKHADO MUNICIPALITY EMPLOYMENT APPLICATION FORM



Direction to candidates:			1.Post details							
1. Applications on form with	DEPARTMENT	•								
full particulars of the										
applicants' training, qualifications, skills,	POSITION									
competencies, knowledge	roomon									
and experience (on a	REF NUMBER									
separate sheet or a CV).										
	2.Personal details									
2. Applicants must indicate post name and where necessary a reference										
	First Names									
number of the vacancy in										
their applications.	Surname									
	Carnanic									
3. Applicants requiring	Date of Birth									
additional information	Date of Birth									
regarding an advertised post, must direct their enquiries to										
Makhado Corporate Support	ID Number									
and Shared Services										
Department.	Do you have a	Yes	No	Code:		License I	No.			
	drivers'	103		oouc.		LICENSEI	10 .			
4. Applications should be forwarded in time to the	license?									
Municipality since	Gender	Male	Female	Are you a			Yes	No		
applications received after				Disadvan	taged In	d Individual?				
the closing date will not be	Are you	Yes	No	Nature of disability:						
accepted.	disabled?									
SPECIAL NOTES:	Are you a	Yes	No	If no state	e your Na	ationality:				
	South				-	-				
2. Makhado Local	African			Do you have a valid work Yes No						
Municipality subscribes to the	Citizen?			permit						
principles of National norms and standards relating to employment equity. We assure you that your opportunity for employment with this Municipality	3.Contact details									
	Postal Address									
	rusiai Audress									
	Residential									
	Address									
depends solely on your qualifications.	E-mail									
gaamoutono.										
2. Please note that	Telephone									
canvassing and lobbying will	• "									
automatically disqualify your application	Cell									
application										
	4.Language Proficiency									
	Language									
	Languago									
	Speak									
	Read	1								
	Write	1								
		1		I		I				

5.Er	DUCATIONA	L QUALIFICATIONS						
5.1.Tertiary Education(ignore if cv attached)								
Name of Institution		Qualifications	Year Obtained					
5.	2.Second	ARY EDUCATION						
Highest Standard passed	Ex	emption Yes/No	Year obtained					
	6.Work	Experience						
Employer	Position held		Period of employment					
		ERENCES						
Name of Person	Relationship to You		Contact					
8.Declaration								
I declare that all the information provi best of my knowledge. I duly author educational qualifications, profession consumer credit, criminal record, drivi information supplied could lead to my	ided (includir prize credent pnal member vers' license	ng the attachments) is ial verification types ship, employment hi and fraud prevention	include, but are not limited to, story, employment references, checks I understand that false					
Signature:		Date:						

Return address: The municipal manager Makhado municipality Private bag x 2596 Makhado 0920