Enquiries: 051 412 2727 e-mail: lorraine.mkhwane@centlec.co.za website: www.centlec.co.za MANGAUNG
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Reg No. 2003/011012/20

CONFIDENTIAL

30 Rhodes Avenue, Oranjesig Bloemfontein, 9300

APPLICATION FORM FOR EMPLOYMENT SENIOR MANAGERS

TERMS AND CONDITIONS

- 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 in this form. Any additional information may be provided on the CV.
- 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 strictly confidentiality and will not be used for any other purpose than to assess the suitability of the applicant.
- 5. This form is designed to assist municipality with the recruitment, selection and appointment of senior managers in terms of the *Local Government: Municipal Systems Act. 2000* (Act No. 32 of 2000).

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A. DETAILS OF THE ADVERTISED	POST (as reflec	ted in the advert)				
Advertised post applying for						
Reference number						
Name of Municipality						
Notice service period						
B. PERSONAL DETAILS						
Surname						
First Names						
D or Passport Number						
Race	African	Coloured	Indian	White		
Gender		I	Female	Male		
Do you have a disability?						
f yes, elaborate						
Are you a South African citizen?			Yes	No		
f no, what is your Nationality?						
Nork Permit Number (if any):						
Do you hold any political office in a peacting capacity? If yes, provide the in		ther in a permanent, ter	nporary or	No		
Political Party:	Position:	Position:				
Do you hold a professional members pelow	hip with any profe	essional body? If yes, pr	ovide information	No		
Yes						
Professional Body: Membership Number:			Expiry date:	Expiry date:		
C. CONTACT DETAILS	L		1			
Preferred language for correspondence?						

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Telephone number during office hours									
Preferred method for correspondence (Mark with an X)	Post		E-mail				Fa	x	
Correspondence contact details (in terms of above)									
D. QUALIFICATIONS (Additional info	rmation may be p	rovide	d on your	·CV)					
Name of School/ Technical College	Highest Qualification Obtained			Year	Year Obtained				
Name of Institution	Name of Qualification			NQF Level		Year	ained		
ranio di mondicin	ramo or Quamoutorr		1101	110, 20101		. Jan Ostaniou			
E. WORK EXPERIENCE (Additional i	l nformation may b	e prov	ided on y	our CV)				
Employer (starting with the most recent)		F	osition	From		То		Reason for leaving	
				MM	YY	ММ	YY		
If you were previously employed in Loc condition exists that prevents your re-e		indicat	e whethe	r any		Yes		No	
If yes, provide the name of the previou municipality:	is employing					1		•	
F. DISCIPLINARY RECORD									
Have you been dismissed for miscond	uct on or after 5 J	July 20	11?	Yes			No		

Signature:

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If yes, Name of Municipali	ty/Institution:						
Type of Misconduct/Trans	gression						
Date of Resignation/Discip	plinary case finali	zed					
Award/sanction					-		
Did you resign from your job on or after 5 July 2011 pending finalisation of the disciplinary proceedings? If yes, provide details on a separate sheet.					f Yes		No
G. CRIMINAL RECORD							1
Were you convicted of a c fraud or corruption on or a separate sheet.		_	•	-	Yes		No
If yes, type of criminal act							
Date criminal case finalise	∌d						
Outcome/Judgment							
			1				
H. REFERENCE							
Name of Referee Relationship Tel (off		office hours)	ffice hours) Cellphone		Ema	nail	
						\perp	
		<u> </u>				<u></u>	
I. DECLARATION I hereby declare that all the thereof is to the best of my to disclose any information appointed.	y knowledge true	and co	orrect. I under	rstand that	any misrepre	resenta	ation or failure

Date: