

DR KENNETH KAUNDA DISTRICT MUNICIPALITY

APPLICATION FOR EMPLOYMENT

TERMS AND CONDITIONS

1.	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 Curriculum Vitae (CV)
3.	Candidates short-listed for interviews may be requested to furnish additional information that will assist the municipality to expedite recruitment and selection processes.
4.	All information received will be treated with strict confidentiality and will not be used for any other purpose to assess the suitability of the applicant.
5.	This form is designed to assist municipalities with the recruitment, selection and appointment of Senior Managers in terms of the Local Government: Municipal Systems Act, 2000 (Act No 32 of 2000)

A DETAILS OF THE ADVERTISED POST (As reflected in the advert)

Advertised post applying for	
Reference Number	
Name of Municipality	
Notice services period	

B PERSONAL DETAILS

Surname													
First Names													
Identity Number													
Gender	Male		Female		Race	African		Coloured		Indian		White	

Do you have a disability?	YES		NO	
If YES, elaborate.				

Are you a South African Citizen?	YES		NO	
If NO, What is your Nationality?				
Work Permit Number? (If Any)				

DR. KENNETH KAUNDA
DISTRICT MUNICIPALITY



DR KENNETH KAUNDA DISTRICT MUNICIPALITY

Do you hold any political office in a Political Party, whether in a permanent, temporary or acting position?	YES		NO	
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Political Party														
Position					Expiry Date									

Do you hold a professional membership with any professional body? If YES provide information below.	YES		NO	
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Professional Body?														
Membership Number					Expiry Date									

C	CONTACT DETAILS
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Preferred Language of Correspondence?	
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Contact Number during office hours?														
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Preferred method of Correspondence?	Mark with an "X"									
	POST		E-MAIL		FAX					

Correspondence contact DETAILS (In terms of above)	
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D	QUALIFICATIONS (Additional information may be provided on your CV)
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Name of School/Technical College	Highest Qualification Obtained	Year Obtained	
Name of Institution	Name of Qualification	NQF Level	Year Obtained

E	WORK EXPERIENCE (Additional information may be provided on your CV)
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Employer Starting with the most Recent	Position	FROM		TO		Reason for Leaving
		MM	YY	MM	YY	

[illegible]