

APPLICATION FOR EMPLOYMENT

WHAT IS THE PURPOSE OF THIS FORM

To assist the CATHSSETA in selecting a person for an advertised post.

This form may be used to identify candidates to be interviewed. Since all applicants cannot be interviewed, you need to fill in this form completely, accurately and legibly. This will help to process your application fairly.

WHO SHOULD COMPLETE THIS FORM

Only persons wishing to apply for an advertised position in CATHSSETA.

ADDITIONAL INFORMATION

This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.

SPECIAL NOTES

1. All information be treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details must correspond with **the details in your** ID or passport.

2. Passport number in the case of non-South Africans.

3. This information will only be taken into account if it directly relates to the requirements of the position.

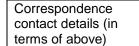
4. Applicants with substantial

qualifications or work experience must attach a CV.

A. THE ADVERTISED POST	
Position for which you are applying (as advertised)	Department/ Business Unit where the position was advertised
Reference number (if stated in the advert)	If you are offered the position, when can you start OR how much notice must you serve with your current employer?

B. Personal information						
Surname						
First names						
Date of birth						
Identification Number				Γ		
Race	African White Coloured Indi					
Gender			Male	Female		
Do you have a disability?			Yes	No		
Are you a South African citizen?			Yes	No		
If no, what is your nationality?						
And do you have a valid work permit?			Yes	No		
Have you been convicted of a criminal offence or been dismissed from employment?			Yes	No		
Do you have a relative working for CATHSSETA?			Yes	No		
If yes above, prov	vide details					

C. HOW DO WE CONTACT YOU				
Preferred language for				
correspondence?				
Telephone number during office				
hours				
Preferred method for	Tel/Cell	Fax	E-mail	
correspondence		I UA		



D. LANGUAGE "good", "fair", or "poor"					
	Languages (specify)				
Speak					
Read					
Write					

E. ACADEMIC BACKGROUNI	D						
Name of School/Technical College		Н	Highest qualification obtained				ed Year obtained
Tertiary education for each q	ualificatio	n you o	btaine	d			
Name of institution		Name of qualification				Year obtained	
F. WORK EXPERIENCE							
Employer (including current			From		Т	ō	
employer)	Post n	Post held		YY	MM	YY	Reason for leaving

G. REFERENCES

Name	Relationship to you	Tel. No. (office hours)				

DECLARATION

I declare that all the information provided (any attachments) is complete and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being disqualified or my discharge if I am appointed.

Signature:

Date: