

BREDASDORP

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KAAP AGULHAS MUNISIPALITEIT
CAPE AGULHAS MUNICIPALITY
U MASIPALA WASECAPE AGULHAS

STRUISBAAI

Tel: (028) 435-6538

NAPIER

Tel: (028) 423-3257

AANSOEK OM 'N BETREKKING / APPLICATION FOR EMPLOYMENT

*Hierdie vorm moet in u eie handskrif voltooi en teruggestuur word na bogenoemde adres.
This form must be completed in your own handwriting and returned to the above-mentioned address.*

**ONVOLLEDIGE AANSOEKE SAL NIE OORWEEG WORD NIE
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

BETREKKING VERLANG SALARIS VERLANG
EMPLOYMENT DESIRED SALARY REQUIRED

WANNEER KAN U DIENS AANVAAR?
WHEN CAN YOU ASSUME DUTY?

PERSOONLIK/PERSONAL

VAN: GEBOORTEDATUM:
SURNAME: DATE OF BIRTH:

VOORNAME: TITEL
CHRISTIAN NAMES: TITLE

ID: HUWELIKSTAAT:
MARITAL STATUS:

WOONADRES: POSADRES:
RESIDENTIAL ADDRESS: POSTAL ADDRESS:

.....
.....
KODE: CODE:

TELEFOONNOMMER - HUIS: WERK:
TELEPHONE NUMBER - HOME: WORK:

ANDER KONTAK NOMMER:
OTHER CONTACT NUMBER:

Het u aan enige geestelike of ernstige fisiese siektes gely?
Have you suffered any mental or serious physical illnesses?

.....

Is u al ooit skuldig bevind aan 'n kriminele oortreding?

Have you ever been convicted of a criminal offence?

Is u al ooit uit enige betrekking ontslaan?

Have you ever been dismissed from any position?

Vryetydsbesteding(Sport, stokperdjies ens.):

Use of leisure (Sport, hobbies, etc.)

Naam en verwantskap van familielede in hierdie raad se diens:

Names of relatives in the service of this council:

Rede vir aansoek:

Reason for application:

ADDISIONELE INLIGTING / ADDITIONAL INFORMATION

Besit u 'n skoon/geldige bestuurderslisensie?

Have you a clean/legal driving licence?

JA
YES

NEE
NO

Tipe lisensie

Type of licence

Heg gesertifiseerde afskrif aan

Attached a certified copy

*Die vereistes van die pos sal meld indien u in besit van 'n bestuurderslisensie moet wees.

The requirements will say wheter a driving licence is needed for this post.

Was u voorheen in diens van die Kaap Agulhas Munisipaliteit?

Have you previously been employed by the Cape Agulhas Municipality

JA
YES

NEE
NO

Indien ja, meld wanneer en posbenaming

If yes, please state when and job title

Taalvaardigheid

Language Proficiency

Afrikaans

English

Ander/Other

.....

.....

.....

BESONDERHEDE VAN EGGENOOT/E:

DETAILS OF SPOUSE:

NAAM:

NAME:.....

BEROEP:

OCCUPATION:

WERKGEWER:

EMPLOYER:

PERSONEEL MONITERINGSINFORMASIE
PERSONNEL, MONITORING INFORMATION

Die Kaap Agulhas Munisipaliteit benodig die verdere inligting in terme van die Wet op Diensbillikheid. Die informasie wat u verskaf word as streng vertroulik hanteer en word slegs vir statistiese monitering gebruik. Indien u nie hierdie gedeelte voltooi nie kan u aansoek nie verwerk word nie.

The Cape Agulhas Municipality requires the following information for the provisions of the Employment equity Act. The information you provide will be treated in the strictest confidence and will be used only for statistical monitoring. We are unable to process applications from candidates who do not complete this section.

(Merk die toepaslike blokkie)
 (Please tick the appropriate box)

Vroulik
 Female

Manlik
 Male

Etniese oorsprong
 Ethnic Origin

Swart
 African

Nie-blank
 Coloured

Indiër
 Indian

Blank
 White

Ander
 Other

Ag u uself as gestremd?
 Do you consider yourself disabled?

JA
 YES

NEE
 No

Indien ja, meld die aard van u gestremdheid

If yes, please state the nature of your disability

Waar het u die advertensie gesien/hoe het u van die pos te hore gekom?

Where did you see the post advertised/how did you hear of the vacancy?.....

VERWYSINGS / REFERENCES

Eksterne aansoekers: As u gekeur word vir u onderhoud sal ons graag u referente wil kontak. U moet die naam van die persoon meld aan wie u verantwoording doen of gedoen het.

External applicants: If your are selected for an interview we will wish to take up references. You should give the name of your line Manager in your present or most recent employment.

Interne aansoekers: Indien u gekeur word vir 'n onderhoud versoek ons 'n verwysing van u Toesighouer.
Internal Applicants: If you are selected for an interview we will seek a reference from your Supervisor.

1) Naam Posbenaming
 Name Position Held.....

Organisasie
 Organisation

Adres / Address

.....

Tel nr.
 Tel no.

2) Naam Posbenaming

Name Position Held.....

Organisasie

Organisation

Adres / Address

.....

Tel nr.

Tel no.

Meld of ons u referente voor die onderhoud kan kontak JA NEE

Please indicates if we can contact your referees prior to the interview YES NO

VERKLARING / DECLARATION

Hiermee sertifiseer ek dat die inligting korrek is en bevestig ek dat dit deel vorm van my ooreenkoms.
I certify that the information provided is correct and agree that they should form part of the basis of my engagement.

Het u al die bewyse van u kwalifikasies aangeheg soos van toepassing op die betrekking
waarvoor u aansoek doen? JA NEE

Did you include all documents as proof of your qualifications, as require for the position
you are applying for? YES NO

***Die verskaffing van vals inligting of kwalifikasies mag lei tot ontslag sonder kennisgewing.
Falsification of qualification of information may lead to dismissal without notice.***

HANDTEKENING DATUM

SIGNED DATE

Gunswerwing by amptenare of lede van die Raad of enige Komitee van die Raad, direk of indirek vir enige aanstelling in die Raad se diens sal die aansoeker diskwalifiseer vir aanstelling.

Canvassing of employees or other members of the Council or any Committee of the Council directly or indirectly for any appointment under the Council shall disqualify the candidate concerned for the appointment.