



Munisipaliteit
Municipality
Umasipala

AANSOEK OM BETREKKING / APPLICATION FOR EMPLOYMENT

Privaatsak X52 / Private Bag X52 Malmesbury 7299

Tel nr / no (022) 487 9400

Faks / Fax (022) 487 9440

E-pos / E-mail: swartlandmun@swartland.org.za

1. AANWYSINGS / DIRECTIONS

(a) Voltooi vorm in u eie handskrif.	(a) Complete form in own handwriting.
(b) Merk die toepaslike blokkie met 'n "X".	(b) Mark the appropriate block with an "X".
(c) Oorspronklike sertifikate en ander dokumente moet nie met hierdie aansoek voorgelê word nie.	(c) Original certificates and other documents must not be submitted with this application.
(d) Alle vrae moet volledig beantwoord word, ook deur werknemers van die Swartland Munisipaliteit.	(d) All questions must be answered in full. This also applies to employees of Swartland Municipality.

2. BESONDERHEDE VAN BETREKKING VERLANG / PARTICULARS OF POSITION APPLIED FOR

Posbenaming Designation:	Departement Department:	Verw No. Ref No.:
-----------------------------------	----------------------------------	----------------------------

3. PERSOONLIKE BESONDERHEDE / PERSONAL PARTICULARS

<input type="checkbox"/> Dr	<input type="checkbox"/> Mnr Mr	<input type="checkbox"/> Mev Mrs	<input type="checkbox"/> Mej Miss	<input type="checkbox"/> Manlik Male	<input type="checkbox"/> Vroulik Female
VAN / SURNAME		Personeel No. / Staff No. (Current - EES)		NOOIENSVAN / MAIDEN NAME	
Voorname (voluit) / Christian Names (in full):					Huistaal / Home Language
Geboortedatum / Date of Birth		Ouderdom / Age		Reisdokument- Travel document-	Paspoort- Passport-
	 jr / yrs mnde / mnths			
Burgerskap / Citizenship		Bevolkingsgroep / Population Group		Aantal afhanklike kinders Number of dependant children:	
Huwelikstatus Marital Status		Ongetroud Single	Getroud Married	Geskei Divorced	Wewenaar Widower
Weduwee Widow					
Permanente Posadres / Permanent Postal Address				Tel. (Huis / Home)	
.....				
.....				Tel. (Werk / Work)	
.....				
Ander maniere van kontak indien geen telefoon / Other means of contact if no telephone:					
.....					

Is enige van u familie of kennisse in diens van die Raad?
Are any of your relatives or acquaintances employed by the Council? Ja Yes Nee No

Indien wel, meld Naam, Departement en Verwantskap
If "Yes", state Name, Department and Relationship :

Taalvaardigheid / Language Proficiency:
Dui in die tabel hieronder u vaardigheid aan as "Goed", "Redelik", "Swak" of "Geen"
In the schedule below, indicate proficiency as "Good", "Fair", "Poor" or "None"

Taal Language	Lees Read	Skryf Write	Praat Speak	Hoogste kwalifikasie Highest qualification
Afrikaans				
Engels / English				
Ander (Spesifiseer) Other (Specify)				

OPLEIDING / EDUCATION (Heg afskrifte van sertifikate aan / Attach copies of certificates)

SKOOL / SCHOOL					
Hoogste graad geslaag / Highest grade obtained:				Jaar / Year:	
Naam van Skool Name of School			Plek Place		
Vakke geslaag / Subjects passed:		Graad Grade	Simbool Symbol	Graad Grade	Simbool Symbol
1.				5.	
2.				6.	
3.				7.	
4.				8.	
NASKOOLSE OPLEIDING / POST SCHOOL EDUCATION (Heg afskrifte van sertifikate aan / Attach copies of certificates)					
Naam van Inrigting en Plek Name and Place of Institution		Tydperk bygewoon Period attended Van/From		Tot/To	
				Kwalifikasie verwerf Qualification obtained	
Vakke geslaag (Hoogste vlak) Subjects passed (Highest level)		Graad Grade	Simbool Symbol	Graad Grade	Simbool Symbol
1.				6.	
2.				7.	
3.				8.	
4.				9.	
5.				10.	
VAKLEERLINGSKAP / APPRENTICESHIP					
Ambag waarin gekwalifiseerd / Trade qualified in:				Datum / Date:	
Naam van Maatskappy waar vakleerlingskap voltooi is / Name of Company where apprenticeship was completed:					
Vaktoets/ Trade Test:	<input type="checkbox"/> Geslaag Passed	<input type="checkbox"/> Nie geskryf Did not write	<input type="checkbox"/> Nie geslaag Failed	Indien geslaag meld / If passed state:	Kontraknommer/ Contract Number:
					Datum/ Date:
VERDERE STUDIE / FURTHER STUDIES					
Studeer u tans of beplan u verdere studie? / Are you studying at the moment or do you intend to?					
Besonderhede / Particulars:					
.....					
ANDER OPLEIDING / OTHER TRAINING					
Rekenaaropleiding / Computer training:					
Enige opleiding nog nie gemeld nie / Any training not yet listed:					
.....					
Lidmaatskap van Instituut / Vereniging Membership of Institute / Association:					
Bestuurderslisensie/ Driver's License: (Heg afskrif aan / Attach copy)		<input type="checkbox"/> A	<input type="checkbox"/> A1	<input type="checkbox"/> B	<input type="checkbox"/> C1
		<input type="checkbox"/> C	<input type="checkbox"/> EB	<input type="checkbox"/> EC1	<input type="checkbox"/> EC
Datum van uitreiking / Date issued:		Ander (Spesifiseer) / Other (Specify):			
.....				

6. GESONDHEIDSTOESTAND

Het u enige liggaamsgebreke wat u aktiwiteite mag strem? Indien wel, verstrek besonderhede.
Do you suffer any physical disability which may affect your activities? If so, give details.

Het u ooit enige behandeling vir geestesebreke gehad?
Have you ever had any treatment for mental defects?
Indien wel, verstrek besonderhede.
If so, give details.

Meld algemene gesondheidstoestand.
State general condition of health.

GEWOONTES: Rook u? Hoeveel per dag?
Do you smoke? How many per day?
HABITS: Alkohol verbruik?
Use of alcohol?

7. ALGEMEEN / GENERAL

Is u voorheen / Have you ever been -

(a) Skuldig bevind aan 'n kriminele oortreding?
Convicted of a criminal offense?

Ja
Yes

Nee
No

(b) Ontslaan uit diens?
Dismissed from employment?

Ja
Yes

Nee
No

Is enige kriminele saak teen u hangende?
Is any criminal case pending against you?

Ja
Yes

Nee
No

Indien wel, meld besonderhede op 'n aparte vel / If so, state particulars on separate sheet.

Is u insolvent of onder administrasie?
Are you insolvent or under administration?

Ja
Yes

Nee
No

Indien wel, meld besonderhede op aparte vel / If so, state particulars on separate sheet.

Is u lid van 'n geregistreerde Mediese Fonds?
Are you a member of a registered Medical Aid Fund?

Ja
Yes

Nee
No

Tydperk / Period

Was u of is u tans lid van 'n Plaaslike Owerheid Pensioenfonds? / Have you ever been or are you at present a member of a Local Government Pension Fund?

Ja
Yes

Nee
No

Tydperk / Period

Hoe het u van die betrekking verneem? / How did the position come to your attention?

Indien in die Pers, watter koerant? / If in the Press, state which paper?

Meld die bedrag van u totale maandelikse finansiële verpligtinge soos skuld, huurkope, lenings, ens. R

State the amount of your total monthly financial commitments such as debts, hire purchases, loans, etc. R

8. VERKLARING / DECLARATION

Ek verklaar dat die voorafgaande besonderhede na die beste van my wete waar en juis is; verder verstaan en aanvaar ek dat indien ek aangestel word, my aanstelling onderworpe is aan die bepalings van die Diensvoorwaardes en Beleid van die Raad en enige toepaslike wetgewing.

I declare that the above particulars are, to the best of my knowledge true and correct and understand accept that if I am appointed, my appointment will be subject to the provisions of the Conditions of Service and the Policy of the Council and any applicable legislation.

20

Handtekening van applikant
Signature of applicant:

SLEGS VIR KANTOORGEBRUIK / FOR OFFICE USE ONLY

Onsuksesvol
Unsuccessful

Aanstelling
Appointment

Bevordering
Promotion

Oorplasing
Transfer

Tydelik
Temporary

Permanent
Permanent

Posbenaming /
Designation:

Posbenaming /
Designation:

Posbenaming /
Designation:

Met ingang van /
With effect from:

20

Kerf /
Notch:

R

Goedgekeur /
Approved:

DEPARTEMENTSHOOF
HEAD OF DEPARTMENT

MENSLIKE HULPBRONNE BEAMPTTE
HUMAN RESOURCE MANAGER