

Application for Employment (AFE)

A. ADVERTISED POST											
Position for which you are applying (as advertised) Location											
<u> </u>											
B. PERSON	AL INFO	RMATION									
Surname											
Maiden Name											
First Names											
Date of Birth											
Age											
ID/Passport Number											
Race (EE)	Afric	an	V	Vhite	2		Col	Coloured		Indian	
Gender		FEMALE						MA	LE		
Residential Address											
Postal Addre	Postal Address										
Contact		(w)					(cell)				
Numbers		(h)				1	(fax)				ī
Married Married					Divo	Divorced					
Single Widow											
Are you a South African Citizen? YES								NO			
If no, what Nationality	is your		"						•		
Do you have Permit?	e a valid	work	YES			NO		EXPIRY	DATE		
Do you have a disability?					110		PLEASE	SPECIFY			

C. LANGUA	C. LANGUAGE PROFICIENCY							
			Languages	s (specified)				
	E.g. English							
Speak								
Read								
Write								

NO

YES

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Do you have a disability?

D. COMPUTER LITERACY									
		Proficiency							
	Beginner	Intermediary	Advanced						
MS Word									
MS Excel									
MS PowerPoint									
MS Outlook									
MS Projects									
Other									
Other									
Other									

E. EDUCATION HISTORY		
Name of School	Highest Standard/Grade Passed	Year Obtained
Tertiary education (comple	ete for each qualification you obtaine	ed)
Name of Institution	Name of Qualification	Year Obtained
Current study (institution and qualificat	l cion)	

F. COURSES COMPLETED		
Name of Course	Name of Institution	Date

G. EMPLOYMENT HISTORY								
Are you currently employed		YES			NO			
Organisation	Position		Fr MM	YY	MM	O YY	Reason Leavin	
								·

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H. OFFENCES				
Have you ever been con	YES	NO		
If Yes, provide details a	s listed below	<i>r</i> :		
Nature of Offence	Date	Place where comm	Sanction	

I. GENERAL		
Do you have a valid driver's license?	YES	NO
Do you have your own vehicle?	YES	NO
What is your current CTC?		
What is your salary expectation?		
What is your notice period?		

J. PROFESSIONAL REFERENCES (PERSONS YOU REPORTED TO)						
Name & Surname	Designation	Contact No.				

K. WAIVER OF APPLICATION

In exchange for the consideration of my job application by HWSETA, I hereby agree and certify that:

- 1. The information on this form is true and accurate to the best of my knowledge;
- 2. I understand that false, inaccurate or misleading information, in this application, will constitute sufficient cause for refusal of hire or may result in my termination due to dishonesty;
- 3. Neither the acceptance of this application nor any subsequent interview(s), either for the position applied for or any other position, shall serve to create an actual or implied expectation of an offer of employment and I realize that the completion of this form gives me no rights which I do not currently have;
- 4. I authorise the company to verify all statements contained in this application concerning my education, employment experience/history and all other aspects of my background relevant to my proposed employment, including contacting schools, previous employers, references and similar institutions.
- 5. I hereby grant the HWSETA access to use and/or save the above information in accordance with the Protection of Personal Information (PoPI) Act.

Applicant Signature:	Date:

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