



## ILEMBE DISTRICT MUNICIPALITY EMPLOYMENT FORM (ANNEXURE B)

### NOTE WELL:

**THIS FORM INFORMS THE BASIS OF RECRUITMENT, SELECTION AND APPOINTMENT  
PLEASE ATTACH UPDATED CV AND CERTIFIED COPIES OF ID, QUALIFICATIONS AND OTHER DOCUMENTS**

ADVERTISED POST APPLIED FOR:																				
DEPARTMENT:																				
NAMES:												SURNAME:								
GENDER:	M		F	IDENTITY NO. :																
RACE:	A: <b>AFRICAN</b> C: <b>COLOURED</b> I: <b>INDIAN/ASIAN</b> W: <b>WHITE</b>										AGE (IN YEARS):									
DISABILITY (YES/NO): ..... IF YES SPECIFY TYPE OF DISABILITY: ..... <span style="float: right;">Mental/Physical/Hearing/Sight/Other (Specify)</span>																				
CONTACT DETAILS:		CELL:										E-MAIL:								
MUNICIPALITY (OWN):												WARD NO.:								
PHYSICAL ADDRESS:																				
POSTAL ADDRESS:																				

**HIGHEST ACADEMIC QUALIFICATION (CERTIFICATE/DIPLOMA/DEGREE/POST-GRADUATE DEGREE):**

.....

**OTHER ACADEMIC QUALIFICATIONS (CERTIFICATE/DIPLOMA/DEGREE/POST-GRADUATE DEGREE):**

1. ....
2. ....
3. ....
4. ....
5. ....

**JOB RELATED SKILLS, TRAINING AND/OR COMPETENCIES (E.G. DRIVING LICENCE):**

1. ....
2. ....
3. ....
4. ....
5. ....

**SUMMARY OF JOB-RELATED EXPERIENCE (NATURE OF EXPERIENCE AND YEARS/MONTHS):**

1. ....
2. ....
3. ....
4. ....
5. ....

I CONFIRM THAT THE ABOVE INFORMATION, INCLUDING SUBMITTED ATTACHMENTS, IS TRUE AND CORRECT.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ANY ATTEMPT OR ACTION TO INFLUENCE ANY COUNCILLOR OR MUNICIPAL OFFICIAL WILL DISQUALIFY THE APPLICANT AND NULLIFY ANY CONSIDERATION FOR RECRUITMENT, SELECTION AND APPOINTMENT.  
APPLICANTS ARE ADVISED TO BE HONEST AND ACT WITH INTEGRITY.**