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## APPLICATION FORM FOR SENIOR MANAGERS

## **TERMS AND CONDITIONS**

- The purpose of this form is to assist a municipality in selecting suitable candidates for an advertised post.
- 2. This form must be completed in full, accurately and legibly. All substantial information relevant to a candidate must be provided in this form. Any additional information may be provided on the CV.
- Candidates shortlisted for interviews may be requested to furnish additional information that will assist municipalities to expedite recruitment and selection processes.
- 4. All information received will be treated with strictly confidentiality and will not be used for any other purpose than to assess the suitability of the applicant.
- 5. This form is designed to assist municipality with the recruitment, selection and appointment of senior managers in terms of the Local Government: Municipal Systems Act, 2000 (Act No. 32 of 2000).

A. DETAILS OF THE AL	OVERTISED P	OST (as r	eflected in	the advert)		
Advertised post applying for						
Reference number						
Name of Municipality			NOTE: 30			
Notice service period						
B. PERSONAL DETAIL	S		3 38 - 88	<del></del>	, , <u>, , , , , , , , , , , , , , , , , </u>	
Surname	T T T T					
First Names				Street To the Court of the Cour	3000 000 000 000 000 000 000 000 000 00	
ID or Passport Number					· · · · · · · · · · · · · · · · · · ·	
Race	African	Colour	ed	Indian	White	
Gender				Female	Male	
Do you have a disability?	Do you have a disability? Yes					
If yes, elaborate			***************************************	50 Marines	No	
Are a South African citizen?				Yes	No	
If no, what is your				<del></del>		
Nationality?		70-775				
Work Permit Number (if any):	The state of the s					
Do you hold any political office	e in a political pa	arty, whether	er in a pern	nanent, temporary	y <sub>No</sub>	
or acting capacity? If yes, pro-		elow.		T	110	
Political Party:	Position: Expiry date: membership with any professional body? If yes, provide					
nformation below	nembership with	any protes	isional pod	y? It yes, provide		
Yes					No	
Professional Body:	Membership Number:			Expiry date:		
1 Tologonal Doug.	wembership remuer.   Expliy date:					
C. CONTACT DETAILS						
Preferred language for						
correspondence?						
Telephone number during						
office hours						
Preferred method for						
correspondence (Mark with	Post		E-mail		Fax	
an X)		and the second second second				
Correspondence contact						
details (in terms of above)						

D. QUALIFICATIONS ( Name of School / Technic College	Cal Highest Q	tualification Obtaine	d	Year Obtained			
Name of Institution	Name of (	Name of Qualification			el	Year Obtained	
E. WORK EXPERIENC	E (Additional i	nformation may be	provid	ed on your	CV)		
Employer (starting with the most recent)	Position	From MM	YY	To MM YY		Reason for leaving	
				-			
If you were previously em	ate	Yes		No			
whether any condition exi If yes, provide the name of the previous employing municipality:	of preven	is your re-employmo	ent:				
F. DISCIPLINARY REC	ORD				Harry		
Have you been dismissed for misconduct on or after 5 July 2011?				Yes	98-000-0 63	No	
If yes, Name of Municipality/ Institution:							
Type of a Misconduct/ Tra	T						
Date of Resignation/ Disc	iplinary case fir	nalised					
Award/ sanction							
Did you resign from your job on or after 5 July 2011 pending finalisation of the disciplinary proceedings? If yes, provide details on a separate sheet.						No	
G. CRIMINAL RECORD	<u> </u>						
Were you convicted of		fence involving fin	ancial	Yes		No	
misconduct, fraud or corruption on or after 5 July 2011? If yes, provide details on a separate sheet.							
If yes, type of criminal act							
Date criminal case finalise Outcome/ Judgment	80						
H. REFERENCE							
	ntionship	Tel (office hours)	Се	ellphone Number		Email	
				W 45 - 000			
I. DECLARATION		****	···				
I hereby declare that all th is to the best of my knot disclose any information appointed.	Medge true an	id correct. I undersi	tand th	at anv misr	eorese.	ntation or failure to	
Signature:		Date:					

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