



WORK EXPERIENCE					
Employer (including current employer)	Post held	From		To	
		MM	YY	MM	YY
1.					
2.					
3.					
4.					

CHECKLIST		
The following certified documents must be attached to this application, or the application will be disqualified		
Document	Tick (✓)	
1. Certified copies of:	1.1 Identity Document	
	1.2 Matric/Grade 12	
	1.3 Other qualifications (specify): _____	
	1.4 Other qualifications (specify): _____	
2. Fully completed application form		
3. A comprehensive Curriculum Vitae (CV)		
4. A covering letter (motivation letter – where necessary)		
5. Proof of residence (and an affidavit if proof of residence is not on the applicant's name – where necessary)		
6. Affidavit (where necessary)		
7. Other (Specify):		

Have you ever participated in an internship/work integrated learning programme before?		
Yes	No	If yes, specify:

DECLARATION
I declare that I am aware of the rules for this application and that I understand them. I declare that the information supplied in this application is true and correct. I understand that any false information will automatically disqualify me.
Name and Surname: _____
Signature: _____
Date: _____

