

Application form Projects

POSITION FOR WHICH YOU ARE APPLYING (SPECIFY)													
PERSONAL INFORMATION													
Surname and Full names													
Date of Birth (YYY/MM/DD)		Identity Number											
Age													
Race	<i>African</i>	<i>White</i>	<i>Coloured</i>	<i>Indian</i>	<i>Other (specify)</i>								
Gender		Female				Male							
Do you have a disability?		Yes				No							
If yes, specify:													
Are you a South African citizen? <i>If no, what is your nationality?</i>		Yes				No							
Do you have a valid work permit? (only if non-South African)		Yes				No							
Have you been convicted or found guilty of a criminal offence (including an admission of guilt)? <i>If yes (provide the details)</i>		Yes				No							
Do you have any pending criminal case against you? If yes, (provide the details)		Yes				No							
		Specify:											
CONTACT DETAILS													
Residential address		Street number and name:											
		Town (City):											
		Municipality:											
		Postal code:											
Postal address		Private Bag/PO Box											
		Town (City):											
		Municipality:											
		Postal code:											
Telephone number													
Cellphone number													
E-mail address													
Alternative contact no.													

EDUCATIONAL QUALIFICATION (from highest to the lowest)		
Name of School/Institution	Name of qualification obtained	Year obtained
1.		
2.		
3.		
4.		

Your future starts here!

**CARLETONVILLE
CAMPUS**
20 South Street
CARLETONVILLE
Tel: 018 787 4012

**KRUGERSDORP
CAMPUS**
32 Von Brandis Street
KRUGERSDORP
Tel: 011 953 1140

**KRUGERSDORP WEST
CAMPUS**
87 Figulus Street
KRUGERSDORP WEST
Tel: 011 660 1709

**RANDFONTEIN
CAMPUS**
5 Kiewiet Street
RANDFONTEIN
Tel: 011 693 3608

**WESTONARIA
CAMPUS**
109 Botha Street
WESTONARIA
Tel: 011 754 1089

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: _____

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