

INTERNSHIP APPLICATION FORM

<p>WHAT IS THE PURPOSE OF THIS FORM To assist the agency in selecting a person for an advertised post.</p> <p>This form may be used to identify candidates to be interviewed.</p> <p>Since all applicants cannot be interviewed, you need to fill in this form completely, accurately and legibly. This will help to process your application fairly.</p> <p>WHO SHOULD COMPLETE THIS FORM Only persons wishing to apply for an advertised position in the agency.</p> <p>ADDITIONAL INFORMATION This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.</p> <p>SPECIAL NOTES</p> <ol style="list-style-type: none"> All information will be treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details must correspond with the details in your ID or passport. This information is required to enable the department to comply with the Employment Equity Act, 1998. This information will only be taken into account if it directly relates to the requirements of the position. Applicants with substantial qualifications or work experience must attach a CV. 	A. THE ADVERTISED POST					
	Position for which you are applying (as advertised)					
	Reference number (as stated in the advert)					
	B. PERSONAL INFORMATION					
	Surname					
	First Names					
	Date of Birth					
	ID number ²					
	<i>(Remember to attach certified ID copy)</i>					
	Race ³		<i>African</i>	<i>White</i>	<i>Coloured</i>	<i>Indian</i>
	Gender ³			<i>FEMALE</i>	<i>MALE</i>	
	Do you have a disability? ³			<i>YES</i>	<i>NO</i>	
	Are you a South African Citizen?			<i>YES</i>	<i>NO</i>	
	If no, what is your Nationality					
	And do you have a valid work Permit?			<i>YES</i>	<i>NO</i>	
	Have you ever been convicted of a criminal offence or been dismissed from employment? ⁴			<i>YES</i>	<i>NO</i>	
	Residential address:			Municipal district / locality:		
C. HOW DO WE CONTACT YOU						
Preferred language for correspondence?						
Telephone number during office hours			()			
Preferred method for correspondence		Post	E-mail	Fax		
Correspondence contact details (in terms of above)						

D. LANGUAGE PROFICIENCY – state ‘good’, ‘fair’ or ‘poor’

	Languages (specified)					
Speak						
Read						
Write						

E. QUALIFICATIONS ⁵

Name of School / Technical College	Highest qualification obtained	Year Obtained

Tertiary education (complete for each qualification you obtained)

Name of Institution	Name of Qualification	Year Obtained
Current study (institution and qualification)		

F. WORK EXPERIENCE ⁵

Employer (including current employer)	Post held	From		To		Reason for Leaving	
		MM	YY	MM	YY		
If you were previously employed in the Public Service, indicate whether any condition exists that prevents your re-employment						YES	NO
If yes, provide the name of the previous employing department / municipality / entity							

G. REFERENCES

Name	Relationship to you	Tel. No. (office hours)

**H. MOTIVATION FOR WHY YOU SHOULD BE CONSIDERED FOR THE INTERNSHIP
WHAT VALUE WILL YOU BRING, WHAT ARE YOUR VALUES AS A PERSON:**

(Remember to attach 2 x referral letters so we can establish what others think of you, your abilities and your character)

I. HOW WILL THIS OPPORTUNITY ASSIST YOU OR YOUR FAMILY FINANCIALLY:

(Remember to attach anything we can use to see that you and your family will benefit from this opportunity):

ATTACHMENTS REQUIRED:

ID copy	YES	NO
2-page CV	YES	NO
2-reference / referral letters attached (previous employer / church elder / teacher acceptable)	YES	NO
Proof of financial need attached (anything that can show that you or your family will benefit from this job)	YES	NO

I declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being disqualified or my discharge if I am appointed.

Signature:

Date: