

# EDUCATION

# LDoE APPLICATION FOR AN EDUCATOR POST: PART 1

## **PURPOSE OF THIS FORM**

- To assist the department in selecting a person for an advertised post.
- This form will be used to identify candidates to be interviewed. 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.

### WHO SHOULD COMPLETE THIS FORM

Only people wishing to apply for an advertised position in the department.

### **SPECIAL NOTES**

- 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.
- Passport number in the case of non- South Africans.
- 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.

Please write legibly

A. PARTICULARS OF A	DVERT	ISED I	POST																
A.1. Institution:															_				
A.2. Post description a	nd pos	st leve	l:												_				
A.3. Post number																			
<b>A.4</b> . Circuit:																			
A.5. District:																			
B. PARTICULARS O			NT(p	leas	se iç	gnore if	you	ı have a	ittac	hec	d a CV	with A	ALL	the	follo	wing	infor	mati	on)
B.1. Surname:							_ [	B.2. Firs	st Na	ame	es:								_
B.3. Date of birth	d	4 1	n m	V	V	B.4. IC	) NI	umber					·				_		
B.O. Date of Birth	<u> </u>	u i	11 111	у	у_			al Numb	⊥ oer						+		+		
B.6. S.A. Citizen	YN	I В.	7. If n	o w	hat								L						
B.6. S.A. Citizen Y N B.7. If no what is your nationality?  B.8. Do you have a valid work permit? Y N B.9. Marital Status Singl Marrie Divorc Widow ed er								Wid	dow										
B.10. Gender M	F	$\top$							B 1		Numb		dene		nts	er	Т	Н	
B.12. Contact address	S:												чор	31140	1110.				
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B.13. Tel No: B.14. Cell No. B.14. Cell No. B.15. Do you have a disability? Y N B.16. Nature of the disability.																			
B.17. Race:		Africa				Whit	е			C	oloure	d			1	ndia	1		
B.18. Present post de	escrip	tion a	nd lev	el:															
B.19. Name and add	ress o	f insti	tution	wh	ere	present	ly a	appointe	:d:										
B.20. Are you registe																			N
B.21. Are you presen																		Y	
B.22. Briefly explain	why yo	ou are	on re	etire	me	nt:													
B.23. Were you ever discharged from service by a government department?  Y  If yes, give details:									N										
B.24. Were you ever If yes, provide details	convi	cted c	of a cr	imir	al c	offence?	•											Υ	N
					F 4									13 e 12 11	7 12 10				

C OUALIEIO	ATIONO			Alberto de la	-441	<u> </u>				•				
Qualifications		Certif and d	Certificates, diplomas and degrees obtained			Where obtained?		Subjects passe		d M	onth an ear		Normal duration	
C.1. School highest														
standard passed.														
C.2. Professional e.g.														
l eachers' dip	Teachers' diploma													
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C.3. Academ	ic e.g. BA													
degree.						• • • • •								
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C.4. Technica														
college e.g. N	I. I .C. III													
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LANGUAGE				od, Fai	r or Poor	*								
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OI						+					-		_	
Speak						+							1	
Read													-	
Write														
D. TEACHING										details	)			
D.1. TOTAL N	NUMBER	OF COM	1PLETED	YEARS	OF TEAC	HINC	G EXPE	RIEN	ICE					
D.2.										Grade				
Subjects Taught		Grade	Grade Language Me						Subjects Taught			Language Medium		
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D.3. ANALYSIS OF EDU PHASE Post Le		OVALIO	Post Le											
FIASE	Post L	Years	Post Le		Post Level							Post Lev Post		
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Pre-Primary					-									
Primary					-									
Secondary														
Auxiliary Services														

Tertiary											
E. NON-TEACHING EXPERIENCE(please ignore if you have attached a CV with these details)											
Years of Services	Employer		Summary of	nature of emp	oloyment						
DEEEDENOEO/-I		0) / 111 11									
REFERENCES(please ignore if you h Name	Relationship		lese details)    Tel No.(office hours)								
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F. OTHER CAPACITIES(please igno	re if you have	attached a	CV with these	details)							
F.1. INVOLVEMENT IN EDUCATION	IAL AFFAIRS	(EXAMINAT	ION PANELS	MARKING, e	etc)						
F.2. INVOLVEMENT IN PROFESSIO	NAL ACTIVI	TIES(EDUC/	TOR ORGAN	IISATIONS et	tc)						
	10.127.01171	TILO(LDOO)	TON ONO,	110/1110110, 01	.0)						
F.3. INVOLVEMENT IN PUBLIC LIFE	e.g. membe	r of local cou	ıncil, elder, de	acon)							
F.4. OTHER CAPABILITIES											
1.4. OTHER GALABIETIES											
G. DECLARATION											
I hereby certify that, to the best of my knowledge the particulars provided(including any attachments) are correct in all respects. I understand that any false information supplied could lead to my application being disqualified or my discharge if I am appointed.											
SIGNATURE				D	ATE						