Victoria Primary School

Please return completed form and your CV to vacancies@victoriaprimary.co.za

POSITION APPLIED FOR

1. PERSONAL DETAILS

Full Names (as shown on ID)	

Surname (as shown on ID)	

Title (Mr, Mrs, Miss etc.)	**Marital Status**	**# of Dependents**	**Date of Birth**		

ID No.													

Permanent Address (Residential)	

Email Address	

Beaufort Street, Grahamstown/Makhanda, P.O. Box 531

Tel: 046 622 4850 Fax: 046 622 5246
admin@victoriaprimary.co.za
www.victoriaprimary.co.za

Telephone No.		**Cell No.**	

Emergency Contact Name		**Emergency Contact No.**	

2. QUALIFICATIONS/TRAINING

(Attach certified copies of completed courses)

QUALIFICATION /COURSE	INSTITUTION	DURATION & DATE COMPLETED	REF NAME & CONTACT NO.

4. LANGUAGE PROFICIENCY

(Indicate: None, Poor, Good or Excellent):

LANGUAGE	SPEAK	READ	WRITE
English			
Xhosa			
Afrikaans			
Other (please note)			

5. EXPERIENCE / WORK HISTORY:

EMPLOYER/ SCHOOL	POST held: Grade/ subjects taught	FROM	TO	REASON FOR LEAVING

With respect to the above, please indicate:

a. Any Disciplinary /Performance Counselling Corrective Action?	Yes/ No
If Yes, please clarify:	

b. Any period of Sick Leave?	Yes/ No
If Yes, please clarify:	

c. Have you lodged/submitted any grievances?	Yes/No
If Yes, please clarify:	

d. Have you referred to any CCMA Case/Matter or as a collective?	Yes/No
If Yes, please clarify:	

e. Do you have a valid Driver's Licence?	Yes/ No

f. Will you have any issues with traveling to/from work?	Yes/No
If Yes, please clarify:	

g. Are you prepared to provide an official UIF (Unemployment Insurance Fund) Department of Labour Document to support/confirm and substantiate your employment history and reasons for termination?	Yes/No
If No, please clarify:	

6. PLEASE ANSWER THE FOLLOWING QUESTIONS WITH

Yes or No - if Yes, please clarify

a. Have you ever been convicted of a criminal offence?	Yes/No
If Yes, please clarify:	

b. Have you ever been dismissed from employment?	Yes/No
If Yes, please clarify:	

c. Have you ever received any disciplinary warnings?	Yes/No
If Yes, please clarify:	

d. Have you been investigated for any disciplinary incidents?	Yes/No
If Yes, please clarify:	

e. Have you been investigated for any work performance counselling incidents?	Yes/No
If Yes, please clarify:	

f. Have you been booked off ill within the past year for more than three days?	Yes/No
If Yes, please clarify:	

g. Do you have any medical / health problems?	Yes/No
If Yes, please clarify:	

h. Do you have any Alcohol / Drug related problems?	Yes/No
If Yes, please clarify:	

i. Have you had any Alcohol / Drug related work incidents?	Yes/No
If Yes, please clarify:	

j. Personal matters that may negatively influence your work?	Yes/No
If Yes, please clarify:	

k. Do you have any phobias or fears?	Yes/No
If Yes, please clarify:	

l. Have you any physical or mental problems?	Yes/No
If Yes, please clarify:	

m. Do you appear on a list of Registered Sex Offenders?	c Yes c No
If Yes, sign to confirm approval for us to request information from the Department of Labour:	
SIGNATURE	

7. STATE BRIEFLY WHY YOU FEEL YOU ARE THE RIGHT PERSON FOR THE JOB

8. COPIES OF CERTIFIED DOCUMENTATION

Please supply certified photocopies of:

a. Identity Document Yes /No

b. Qualifications and Training Certificates

(including transcript of results) Yes/No

c. SACE Certificate Yes/No

d. South African Police Clearance Yes/No

e. Drivers License Yes/No

h. UIF Work History Yes/No

i. Work Permit if a Foreigner Yes/No

PLEASE NOTE Provision of Documentation

In the event of an offer of employment being made to the applicant and employment relationship commencing while failing to provide specific information as undertaken, then the employer may suspend the employment relationship (No-Work / No-Payment Basis), until such documentation is provided and after reasonable time if still unable to provide, terminate the contract. **This Document Does Not Constitute an Offer of Employment.**

Practical Selection and Interview Process Testing / Assessment

As part of the Selection and Interview Process, the employer may request the applicant to undergo certain on the job selection competency testing and assessment, requiring training or actual work to be done, to determine the applicant's suitability for the work / position applied for.**This Does Not Constitute an Offer or Commencement of Employment.** The details as follows:

I understand and agree to the competency screening process (Signature)

Name (please print)	**Signature**	**Date**

IMPORTANT OFFER OF EMPLOYMENT

(Confirmation of Employment):
This Application Form or Subsequent Interview, Assessment Training does not constitute an Offer of Employment or Employment Relationship.

All Offers of Employment will be made in writing, signed by the Employer and to be valid, signed and accepted by the Employee as well as a signed Contract of Employment.

To confirm, employment will only be valid and binding in the event of a signed employment offer, signed Contracts of Employment and completion of the vetting period.

DECLARATION OF ACCURACY / CORRECTNESS & VETTING PROCESS

I hereby give the employer full permission to vet and check the accuracy and correctness of all the above details provided and supplied by myself. In the event of a job offer being made and employment being commenced with, the employer shall be given a period of 1 (one) month after the commencement of employment to verify/check these details, the employment contract will only be confirmed at the conclusion of the vetting process. In the event of it being found that any misrepresentation or dishonesty has taken place, it will then be accepted than no Contract of Employment was entered, into and the contract of employment will be declared null and void and employment relationship cease/end immediately, this shall not be considered or constitute a dismissal.

I declare that all the above particulars/Information are complete/accurate/correct/truthful, and I understand that any false/incorrect information supplied, will be considered Misrepresentation/ Dishonesty and in the event of an offer of employment being made, and employment commencing, will result in the contract being null and void. I further note, understand, and agree to the vetting process and that the employer will have a period of three months to vet and check the accuracy of any information contained in this application or contained in my Curriculum

Vitae (CV) and in the interview process. In the event of an employment relationship commencing, I further note, understand and agree that the employment contract will only commence at the conclusion of the one-month vetting process.

DECLARATION OF POPIA ACT (PROTECTION OF PERSONAL INFORMATION ACT)

In accordance with POPIA Act, I hereby give the employer permission to disclose and make use of any of the information as contained in this Employment Application Form / Curriculum Vitae (CV), as deemed applicable and necessary by the employer, relating to the Interview, Assessment/Selection, Appointment and Employment Process.

PERMISSION TO CONTACT AND OBTAIN REFERENCES/VETTING

I hereby give the employer permission to contact any employer as contained in this application form, my Curriculum Vitae or UIF record form or any other document as contained herein, to obtain references or vetting check any information as deemed necessary.

Name (please print)	**Signature**	**Date**

I fully understand and agree to the above and also confirm the accuracy thereof.

Only applicants to be interviewed will be contacted

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FOR OFFICE USE ONLY

Start Date	**Job Title**	**Employee Number**

Employee Name (please print)	**Employee Signature**	**Date**
Witness Name (please print)	**Witness Signature**	**Date**