

HR002R02

**QUALITY COUNCIL FOR TRADES AND QUALIFICATIONS
EMPLOYMENT APPLICATION FORM**

TERMS AND CONDITIONS

1. The purpose of this form is to assist QCTO in selecting suitable candidates for an advertised post.
2. This form must be completed in full, accurately and legibly. All substantial information relevant to a candidate must be provided in this form. Any additional information may be provided on the CV.
3. Candidates shortlisted for interviews may be requested to furnish additional information that will assist QCTO to expedite recruitment and selection processes.
4. All information received will be treated with strict confidentiality and will not be used for any other purpose than to assess the suitability of the applicant.
5. This form is designed to assist QCTO with the recruitment, selection and appointment.

A. DETAILS OF THE ADVERTISED POST

Position for which you are applying for (as advertised)			
Reference number of the post (as stated in the advert)			
Notice service period			
Internal applicant		External applicant	

B. PERSONAL DETAILS

Surname							
First Names							
ID or Passport Number							
Race (Mark with X)	African	Coloured	Indian	White	Other (State)		
Gender (Mark with X)	Male			Female			
Do you have a disability? (Mark with X)	Yes			No			
Are you a South African Citizen? (Mark with X)	Yes			No			
If no what is your Nationality?							
Work Permit Number :							
Do you hold a professional membership with any professional body? (Mark with X)	Yes			No			
Professional body name							
Membership Number				Expiry date			

C. CONTACT DETAILS					
Preferred language for correspondence?					
Telephone number during office hours.		1.			
		2.			
Preferred method of correspondence (Mark with X)		Post		E-mail	Fax
Correspondence contact details (In term of the above					

D. QUALIFICATIONS				
Name of the School/Technical Collage				
Highest Grade/Standard or Qualification obtained (e.g. Grade 12)		Year Obtained		
Subjects				
1.		5.		
2.		6.		
3.		7.		
4.		8.		
TERTIARY EDUCATION (Complete for each qualification obtained).				
Name of the institution		Name of the Qualification		Year obtained
1.				
2.				
3.				
4.				
5.				
Current study (Name of qualification and Institution)				

E. Work experience (Elaborate on your CV)						
Start with Current / Most Recent Employer						
Employer (starting with the current employer)	From		To		Position	Reason for leaving
	Year	Month	Year	Month		

F. REFERENCE			
Name of Referee	Relationship/Position	Phone Number (office hours)	E-mail address

Further relevant information (experience/knowledge/ skills attributed) relative to the position applying for

NOTE: Certified copies of qualifications/certificates, ID copy, drivers licence, shall accompany applications and detailed CV. Applications forms that are not completed in full will not be considered. Applications that are not signed will also not be considered.

I certify that all the information provided in this application and attachments in support of this application is to the best of my knowledge true and correct. I understand that any misrepresentation or failure to disclose any information may lead to my application being disqualified or termination of my employment contract, if I am appointed.

Signature of Applicant: _____ Date _____