



SENTRAAL-SUID
KOÖPERASIE • CO-OPERATIVE
BPK • LTD

APPLICATION FOR EMPLOYMENT

This form must be completed in full and in your own handwriting. The information that you provide will be dealt with as strictly confidential. Legible copies of your identity document and drivers licence (if applicable) must be attached hereto.

Position for which you are applying: _____

On which date, in the event that your application is successful, will you be able to commence employment? _____

A. PERSONAL DETAILS

Surname: _____

Full Names: _____

Residential Address: _____

_____ Postal Code: _____

Postal Address: _____

_____ Postal Code: _____

Contact Numbers:

Home: (____) _____

Work: (____) _____

Mobile: _____

E-mail address: _____

Identity Number:

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Age: _____

Gender: _____

Do you possess a valid drivers license? _____ Code: _____

Marital Status: _____

Number of Dependants: _____ Ages: _____

Full Names of Spouse / Life Partner: _____

Are you a South African citizen? _____

SARS Tax Number: _____

B. LANGUAGE PROFICIENCY

(Mark with a "X")

	GOOD	FAIR	POOR
Afrikaans			
English			
Xhosa			
Zulu			
Other			

C. HEALTH

Do you currently experience or suffer from any serious health related condition(s)? _____

If yes, please state such condition(s) _____

Do you currently use medication and/or receive medical treatment? _____

Do you suffer from any allergies? _____

Do you have any physical disabilities? _____

If yes, please state such disabilities? _____

D. QUALIFICATIONS

NAME OF SCHOOL		
HIGHEST GRADE AND SUBJECTS PASSED		

University, Technical, Professional or any other qualifications:

NAME OF INSTITUTION	QUALIFICATION ACHIEVED	DATE

Certified copies of qualifications must be provided upon request.

Are you currently engaged in further studies? _____

If yes, please state particulars: _____

E. OTHER

Have you ever been declared insolvent? _____

Have you ever been convicted of a crime and/or have you made any admissions of guilt? _____

If yes, please state particulars: _____

Any hobbies or other interests?

F. EMPLOYMENT HISTORY

(Start with your present employer and thereafter list previous employers retrospectively.)

EMPLOYER	POSITION HELD	DATE FROM	DATE TO
1.			
2.			
3.			
4.			
5.			

Reasons for resignation/termination of employment (Match with numbers above):

1.			
2.			
3.			
4.			
5.			

G. REMUNERATION (PER MONTH)

	CURRENT EMPLOYER	EXPECTED
GROSS SALARY (TCoE)		
INCENTIVES		
OTHER (SPECIFY)		

H. REFERENCES

EMPLOYER DETAILS	CONTACT PERSON	POSITION	CONTACT NUMBER

I. DECLARATIONS AND CONSENT

I, the undersigned, hereby declare that I provided the information to SSK voluntarily and that it is correct in all respects.

I hereby declare the following interests (including business interests, shareholding and similar) and/or potential conflicts of interest(s):

(If necessary, continue on a separate page)

I hereby authorise SSK and any third party service provider to do background investigations on me. Such authorisation includes, but is not limited to, the verification of the following:

- credit records;
- qualifications;
- employment records;
- disciplinary records;
- drivers license and related;
- identity;
- criminal records;
- social media.

I hereby specifically give SSK permission to collect, verify and process any of my personal information, as defined in the **Protection of Personal Information Act** (Act 4 of 2013) as well as the **Promotion of Access to Information Act** (Act 2 of 2000). The aforesaid can be done for any legitimate purposes connected with my potential employment, in order to comply with any statutory obligation and/or any valid agreement as well as to protect the legitimate interests of SSK and/or any third party.

I am aware of my right to privacy and my right to have my personal information processed in accordance with the conditions for the lawful processing of personal information.

Signed at _____ (place) on _____ (date).

Signature of Applicant

Name and Surname in Print

