



APPLICATION FORM:

Phakamile Mabija Apprenticeship (Women Empowerment)

<p>WHO SHOULD COMPLETE THIS FORM</p> <p>Only persons wishing to apply for an apprenticeship opportunity.</p> <p>ADDITIONAL INFORMATION This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional information that may be required to make a final selection.</p> <p>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.</p> <p>This information will only be taken into account if it directly relates to the requirements of the opportunities.</p> <p>Applications with substantial qualifications or work experience must attach a CV.</p>	A. THE TRADE				
	Trade of which you are applying (as advertised)				
	B. PERSONAL INFORMATION				
	Surname				
	First Names				
	Date of Birth				
	ID number				
	Race	African	Indian	White	Coloured
	Gender	Female		Male	
	Do you have a disability?	Yes		No	
	Are you a SA Citizen (if yes, which Province)	Yes		No	
		(Which Province)			
	Have you ever been convicted of a criminal offence or been dismissed from employment.	Yes		No	
	C. HOW DO WE CONTACT YOU				
	Preferred language for correspondence?				
	Telephone Number		()		
	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					
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 (If any)						
Institution providing	When	What was program	Duration	Completed		Reason for leaving
				Yes	No	
G. REFERENCES						
Name		Relationship to you		Tell no / Cell no		
DECLARATION						
<i>I declare that all the information provided (including 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 in the program.</i>						
Signature:.....				Date:		