



**merSETA**  
MANUFACTURING, ENGINEERING  
AND RELATED SERVICES SETA

# JOB APPLICATION FORM

## PURPOSE

The purpose for this job application form is to assist the merSETA in selecting suitable candidates for advertised positions. This form may be used to identify candidates to be assessed; interviewed and placed in the advertised position. Applicants need to fill in this form completely and accurately as possible. This application form will help in processing your application fairly.

## 1. ADVERTISED POST

**Position for which you are applying for.**

(as stated in the advertisement)

**Department:**

(the department in which the position is located)

**Reference Number**

(As stated in the advert)

## 2. PERSONAL DETAILS

**Title**

**Surname**

**First Names**

**Identity Number**

**Gender**

**M**

**F**

**Race**

**African**

**Coloured**

**Indian**

**White**

**Do you have a Physical Disability?**

**Yes**

(Please provide details)

**No**

**Are you a South African Citizen?**

**Yes**

**No**

(If no, what is your nationality?)

**Do you have a valid work permit?**

**Yes**

**No**

**Have you ever been convicted of a criminal offence, or been dismissed from your employment?**

**Yes**

**No**

## 3. CONTACT DETAILS

**Postal address**

**Email address**

**Telephone number**

**Cellphone number**

**LEADERS IN CLOSING THE SKILLS GAP**

#### 4. QUALIFICATIONS

Year Graduated    School/Institution/College/University

Highest Qualification Obtained  
(grade/degree)


#### 5. WORK EXPERIENCE

Employer    Position held    From    To    Reason for leaving


#### 6. REFERENCES (Please provide names of three references we can contact to confirm details of your employment)

Name    Relationship to you    Tel. No. (office hours)


#### 7. FAMILY DECLARATION

Do you have a relative working for the merSETA?  
(If yes state the name and relationship)

Yes

No

Name

Relationship to you

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#### 8. APPLICANT'S DECLARATION

I declare that the information I have provided in this application form is, to the best of my knowledge and belief, correct and complete. I understand that any false or willfully suppressed information will render my application null and void; and if appointed, I agree that my appointment shall be terminated.

Signature

Date

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