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| NOTE: This Application must be accompanied by the following:* A motivation letter;
* A 2 page CV outlining your experience;
* Certified copies of all qualifications;
* A certified copy of your ID.
 |
| SECTION A: POST ADVERTISED |
| Position Name: | **Bookkeeper and Member Management Controller**  |
| If successful, when can you start? | yyyy / mm / dd |
| SECTION B: PERSONAL INFORMATION |
| Surname: |  |
| First Name: |  |
| Initials: |  | Nationality: |  |
| ID No.: |  |
| Passport No.: |  |
| If not South African, please indicate: |
| * + Whether you are in possession of a valid work permit:
 |  |  |
| * + If ‘yes’, what is the expiry date?
 | yyyy / mm / dd |
| Do you have a valid driver’s license? |  |  |
| Do you have your own vehicle? |  |  |
| Have you ever been sequestrated or declared bankrupt? |  |  |
| Do you agree to the Association obtaining your credit report from the major credit bureaus? |  |  |
| Have you ever been dismissed from your employment? |  |  |
| * + If yes, please provide details and reasons:
 |
|       |
| SECTION C: CONTACT INFORMATON |
| Cell Phone: |  | Home Phone: |  |
| Email: |  |
| SECTION D: LANGUAGE PROVICIENCY (State “Good”, “Fair”, or “Poor”) |
| **Language:** | **Speak:** | **Read:** | **Write:** |
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| SECTION E: EDUCATION (Please attach certified copies of all qualifications) |
| **Name of Institution:** | **Qualification:** | **Year Obtained:** |
|  |  | yyyy |
|  |  | yyyy |
|  |  | yyyy |
|  |  | yyyy |
|  |  | yyyy |
| SECTION F: WORK EXPERIENCE *(Starting with current)* |
| **Name of Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| **Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| **Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| **Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| **Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| **Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| **Employer:** | **From:** | **To:** |
|  | yyyy / mm / dd | yyyy / mm / dd |
| Position: |  |
| SECTION G: REFERENCES |
| **Name of Employer:** | **Contact Person:** | **Contact No.:** |
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| SECTION H: DECLARATION |
| I declare that all information (including any attachments hereto) contained herein is complete and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being rejected or my termination of employment if appointed. |
|  Full Name |
|  Date |  Signature |