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> Tel/Fax: 028-316 2403 Cell: 079 897 4479

Company Registration No.: 2012/026181/07 - VAT Registration No.: 4190260465

Employment Application

A. THE ADVERTISED POST					
Position for which you are applying (as advertised)					
If you are offered the po	sition, when can you start	OR			
how much notice must y	ou serve with your current	t			
employer?					
	B. P	PERSONAL IN	IFORMATION		
Surname					
First names					
Address					
Date of birth	Age				
ID Number					
Valid driver's license	Yes	No		Code	
Gender				Female	Male
Do you have a disability?				Yes	No
Are you a South African citizen?				Yes	No
If no, what is your nationality?					
Have you ever been convicted of a criminal offence or been dismissed from employment?			missed	Yes	No
nom employment:					
C. HOW DO WE CONTACT YOU?					
Preferred language for co	orrespondence				
Telephone number during office hours (()		
Preferred method for correspondence			E-mail Fax		
Correspondence contact details (in terms of above)					

Managing Director: E P van der Riel

D. LANGUAGE PROFICIENCY – STATE 'GOOD', 'FAIR', OR 'POOR'				
	Languages (specified)			
Speak				
Read				
Write				

•	QUALIFICATIONS	
Name of school / Technical College	Highest qualification obtained	Year obtained
Tertiary education (comp	lete for each qualification you obtain)	
Name of Institute	Name of Qualification	Year obtained

WORK EXPERIENCE						
Employer (including current employer)	Post held Fr		om T		0	Reason for
Carrotte Stripte (1975)		MM	YY	MM	YY	leaving

REFERENCE (PLEASE IGNORE IF YOU ATTACHED A CV WITH THESE DETAILS)					
Name	Relationship to you Tel. No. (office ho				

DECLARATION				
I declare that all the information provided (including any attachments) is completed 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 if I am appointed.				
Signature:	Date			