

CONFIDENTIAL

APPLICATION FORM



General Instructions to candidates:

- *Answer each item completely and accurately.*
- *This form should be accompanied by photocopies of birth certificate, marriage certificate (where applicable), educational certificates, evidence of experience claimed and Certificate of Character (to be presented if selected for Interview)*
- *Incorrect/ misleading information or incomplete filling of this application form may lead to rejection of your application.*
- *No telephone call pertaining to this selection exercise will be entertained.*
- *Canvassing in any form will lead to disqualification.*
- *If Applying for Enlistment of Part Time Resource Person, kindly indicate FIELD OF SUBJECT AREA(S) AND MODULES ENLISTED FOR: (Please use additional sheets if necessary)*

POST APPLIED FOR : _____

PERSONAL DETAILS (In Block Letters)

SURNAME (in full) : _____

OTHER NAMES (in full) : _____

MAIDEN NAME (If applicable): _____

NATIONAL IDENTITY CARD: _____

CURRENT RESIDENTIAL ADDRESS:

ADDRESS FOR CORRESPONDENCE (if different from the above):

PHONE NOS: HOME _____ OFFICE _____ MOBILE _____

EMAIL ADDRESS: _____

GENDER : MALE FEMALE

MARITAL STATUS: MARRIED SINGLE OTHER (please specify)

DATE OF BIRTH : (dd-mm-yyyy) : _____ AGE : _____

NATIONALITY : _____

LANGUAGES (Written): _____

LANGUAGES (Spoken): _____

EDUCATION DETAILS:

SECONDARY QUALIFICATIONS

Examining Body: _____

Name of school attended: _____

Certificate obtained: SC GCE (O) Other (Please specify) _____

If other, kindly submit equivalence certificate along with the application.

Month/Year of Examination: _____ Overall Results: _____

SUBJECTS TAKEN	GRADE	SUBJECTS TAKEN	GRADE

HIGHER SECONDARY QUALIFICATIONS

Examining Body : _____

Name of school attended : _____

Certificate obtained : HSC GCE (A) Other (Please specify) _____

If other, kindly submit equivalence certificate along with the application

Month/Year of Examination: _____ Overall Results: _____

MAIN SUBJECTS	GRADE	SUBSIDIARY SUBJECTS	GRADE

TECHNICAL AND VOCATIONAL QUALIFICATIONS (please use additional sheet(s) if necessary)

Examining Body : _____

Country : _____ Duration of Course: _____

Part Time : Full Time : Distance Education _____

Qualification obtained: _____ Class/Division/Level: _____

Date of Result: _____

TERTIARY/PROFESSIONAL QUALIFICATIONS (please use additional sheet(s) if necessary)

NAME OF QUALIFICATION	RESULT CLASS /DIVISION LEVEL	NAME OF INSTITUTION & ADDRESS	DATE OF RESULT	PART TIME/ FULL TIME/ DISTANCE MODE

RESEARCH RECORDS (please give details of your research. Particulars of publications and any additional information should be submitted on a separate sheet)

TITLE OF RESEARCH	FIELD OF RESEARCH	DATE OF PUBLICATION, NAME OF JOURNAL, VOLUME & PAGE NOS

OTHER QUALIFICATIONS (e.g. certification) (please use additional sheet(s) if necessary)

NAME OF QUALIFICATION	RESULT CLASS /DIVISION LEVEL	NAME OF INSTITUTION & ADDRESS	DATE OF RESULT	PART TIME /FULL TIME /DISTANCE MODE

EMPLOYMENT HISTORY (please use additional sheet(s) if necessary)

CURRENT/MOST RECENT EMPLOYMENT		
Job Title:		Salary:
Employer's Name:		Additional Benefits:
Address:	From: (dd-mm-yyyy)	To: (dd-mm-yyyy)
Reason for Leaving:		
Period of Notice:		
Major responsibilities, duties and any significant contributions:		

PREVIOUS EMPLOYMENT HISTORY (please use additional sheet(s) if necessary)

(i)

Job Title:		Salary:	
Employer's Name:		Additional Benefits:	
Address:	From: (dd-mm-yyyy)	To: (dd-mm-yyyy)	
Reason for Leaving:			

(ii)

Job Title:		Salary:	
Employer's Name:		Additional Benefits:	
Address:	From: (dd-mm-yyyy)	To: (dd-mm-yyyy)	
Reason for Leaving:			

Skills including those relevant to the post applied for (please use additional sheet(s) if necessary)

Skill	Last Used	Years of Experience	Skill Level (Advanced/Intermediate/Beginner)

REFEREE

(The Academy of Design and Innovation may contact them if you are shortlisted).

REFEREE 1

Name

Occupation

Address

Phone No.

REFEREE 2

Name

Occupation

Address

Phone No.

If selected, when would you be available to start employment?

Give an indication of the level of salary you would expect:

If shortlisted when will you be able to attend interviews?

I,, the undersigned applicant, have read the General Instructions to Candidates and declare that, to the best of my knowledge, the facts set forth in my application for employment are true and complete. I understand that if considered for employment, any false statement may result in my failure to receive an offer or if I am hired, my employment may be terminated.

Signature of applicant:

Date:

Thank you for completing this form. Please return your completed application form (on or before the closing date specified in the Advertisement) by registered post to:

**The Director
The Academy of Design and Innovation
MITD Complex, Ebene, Rduit 80817**