



WCLA APPLICATION FOR EMPLOYMENT



WHAT IS THE PURPOSE OF THIS FORM

To assist the WCLA in selecting a person for an advertised post.

This form may be used to identify candidates to be interviewed. **You need to fill in all sections of this form completely, accurately and legibly.** This will help to process your application fairly.

WHO SHOULD COMPLETE THIS FORM

Only persons wishing to apply for an advertised position at the WCLA.

ADDITIONAL INFORMATION

This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.

SPECIAL NOTES

1 – 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.

2 – Passport number in the case of non-South Africans.

3 – This information is required to enable the Authority to comply with the Employment Equity Act, 1998.

4 – This information will only be taken into account if it directly relates to the requirements of the position.

5- The WCLA shall consider the criminal record (s) against the nature of the job functions in line with internal information security and disciplinary code.

6- The applicant may submit additional information separately where the space provided is not sufficient.

A. THE ADVERTISED POST (All sections of this form are compulsory)												
Position for which you are applying (<i>as advertised</i>)												
Reference number (<i>as stated in the advert</i>)						If you are offered the position, when can you start OR how much notice must you serve with your current employer?						
Where have you heard of this vacancy?												
B. PERSONAL INFORMATION¹												
Surname and Full names												
Date of Birth		DD/MM/YY		Identity Number	Passport ² number							
Race ³		<i>African</i>		<i>White</i>	<i>Coloured</i>		<i>Indian</i>		<i>Other</i>			
Gender ³							Female		Male			
Do you have a disability?							Yes		No			
Do you have a valid driver's licence?							Yes		No			
Specify licence type:												
Are you a South African citizen?							Yes		No			
If no, what is your nationality?												
Do you have a valid work permit? (Only if non-South African)							Yes		No			
Have you been convicted or found guilty of a criminal offence (including an admission of guilt)? ⁵							Yes		No			
If yes (provide the details)												
Do you have any pending criminal case against you? If yes, (provide the details) ⁵							Yes		No			
If yes (provide the details) ⁵												
Have you ever been dismissed for misconduct from any of your previous employers? ⁴							Yes		No			
If yes (provide the details) ⁶												
Do you have any pending disciplinary case against you? If yes, (provide the details)							Yes		No			
If yes (provide the details)												
Have you resigned from a recent job pending any disciplinary proceeding against you? ⁴							Yes		No			
If yes, please provide more information.												
Have you been discharged or retired from your previous employer on grounds of ill-health or on condition that you cannot be re-employed? ⁴							Yes		No			
Are you conducting business with the State or are you a Director of a Public or Private company conducting business with the State? ⁶ If yes, (provide the details) ⁶							Yes		No			
In the event that you are employed in the WCLA, will you immediately relinquish such business interests?							Yes		No			
Do you have any direct interest in the liquor trade Or are you a family member, partner or business associate of a person with a direct interest in the liquor trade? If yes, please indicate type of business.							Yes		No			
If your profession or occupation requires official registration, provide date and particulars of registration							Date		Reg. No			

7- Each application for employment form must be duly signed and initialled by the applicant. Failure to sign this form may lead to disqualification of the application during the selection process.	C. CONTACT DETAILS AND MEDIUM OF COMMUNICATIONS				
	Preferred language for correspondence				
	Method for correspondence	Post	E-mail	Fax	Telephone
	Contact details (in terms of the above)				

D. SOUTH AFRICAN OFFICIAL LANGUAGE PROFICIENCY – state ‘good’, ‘fair’, or ‘poor’					
	Languages (specify)				
Speak					
Write or read					

E. FORMAL QUALIFICATION (from highest to the lowest) (certified documentation to be submitted once invited to attend interview)		
Name of School/Technical College	Name of qualification obtained	Year obtained
Current study (institution and qualification):		

F. WORK EXPERIENCE (Also attach a detailed CV)⁶							
Employer (including current employer)	Post held	From		To		Reason for leaving	
		MM	YY	MM	YY		
How many years of supervisory experience do you have and indicate period?							
If you were previously employed at the WCLA, is there any condition that prevents your re- appointment						Yes	No
If yes, Provide the name and year of your previous employment and indicate the nature of the condition.							

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

DECLARATION	
<i>I declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information provided will result in my application being disqualified or disciplinary action taken against me if I am appointed:</i>	
Signature:	Date: