



INFORMATION REGULATOR (SOUTH AFRICA)

Ensuring protection of your personal information
and effective access to information

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APPLICATION FORM FOR EMPLOYMENT

PART A: ADVERTISED POSITION

NAME OF POSITION		REFERENCE NUMBER	
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PART B: BIOGRAPHICAL INFORMATION

TITLE (Not compulsory)		SURNAME				NAMES			
Race (Please Tick)	African	White	Coloured	Asian	Other	Gender (Please Tick)	Male	Female	Others
IDENTITY NUMBER OR PASSPORT NUMBER IF NON-SOUTH AFRICAN					DATE OF BIRTH			NATIONALITY	
DO YOU HAVE A DISABILITY (Please Tick)			YES	NO	IF YES: PLEASE PROVIDE DETAILS				
DO YOU HAVE ANY RELATIONSHIP WITH ANY STAFF MEMBER OR MEMBER OF THE INFORMATION REGULATOR (Please Tick)			YES	NO	IF YES; PLEASE PROVIDE DETAILS				
IS THERE ANY PENDING MISCONDUCT CASE AGAINST YOU (Please Tick)			YES	NO	IF YES; PLEASE PROVIDE DETAILS				
HAVE YOU EVER BEEN DISMISSED FROM EMPLOYMENT (Please Tick)			YES	NO	IF YES: PLEASE PROVIDE DETAILS				
HAVE YOU BEEN FOUND GUILTY OR CONVICTED OF CRIMINAL OFFENCE (Please Tick)			YES	NO	IF YES: PLEASE PROVIDE DETAILS				
DO YOU HAVE ANY PENDING CRIMINAL CHARGES AGAINST YOU (Please Tick)			YES	NO	IF YES: PLEASE PROVIDE DETAILS				
ARE YOU DOING BUSINESS WITH THE STATE (Please Tick)			YES	NO	IF YES: PLEASE PROVIDE DETAILS				
ARE YOU AN OFFICE BEARER OF ANY POLITICAL PARTY (Please tick)			YES	NO	IF YES: PLEASE PROVIDE DETAILS				

PART C: CONTACT DETAILS

CELLPHONE NUMBER		EMAIL ADDRESS	
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PART D: EDUCATIONAL QUALIFICATIONS (Please ignore if you have included the educational information on your CV)

HIGH SCHOOL QUALIFICATIONS		
NAME OF SCHOOL	HIGHEST GRADE PASSED	YEAR OBTAINED
TERTIARY QUALIFICATIONS		
NAME OF THE INSTITUTION	QUALIFICATIONS OBTAINED	YEAR OBTAINED

PART E: WORKING EXPERIENCE (Please provide previous work experience on your CV)						
EMPLOYER (Current Employment)	POST HELD	FROM		TO		REASONS FOR LEAVING
		MM	YY	MM	YY	

PART F: DECLARATION	
I declare that all the information provided (including any attachments and CV) is complete and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being disqualified or my dismissal if I am appointed. By filling in the application form, I give consent to processing of my personal information. The personal information submitted herein shall be solely used for processing my application for a job and/or subsequent appointment should my application be successful. All the personal information submitted herein shall be used for the purpose stated above, as mandated by the Protection of Personal Information Act 4 of 2013 (POPIA)	
APPLICANT NAME AND SURNAME _____ SIGNATURE _____ DATE _____	