EMPLOYMENT APPLICATION FORM

Applications must be completed and sent to SAFT Group Recruitment before or on the closing date. Applications can be e-mailed to recruitment@saft.co.za. Incomplete application forms as well as late submissions will result in the application being null and void. Please note that if you do not receive a reply within fourteen (14) days, your application should be considered unsuccessful.

Position applied for:

1. DETAILS OF APPLICANT (Note: Please complete all sections in **BLACK** ink)

Surname: Title:

First Name (In Full): Initial:

Known as:

ID Number: Date of Birth: d d m m y y y y Gender: M F

Race: African Coloured Indian White

Do you have any disabilities as defined by the Department of Labour? YES NO

If "Yes" please specify:

Are you an South African Citizen? YES NO

If "No" do you have an valid work permit to work in SA? YES NO

If "Yes" please attach a certified copy of the work permit to this application form.

2. CONTACT DETAILS OF APPLICANT

Residential Address:

Code:

Postal Address:

Code:

Contact Numbers: Cell: Landline:

Other: E-mail:

3. PRESENT EMPLOYMENT INFORMATION

Employer:

Job Title:

Starting Date: d d m m y y y y Notice Period:

Monthly Salary: R Benefits:

Reasons for leaving:

4. GENERAL INFORMATION

Have you previously worked at any of the SAFT Group of Companies? YES NO

If "Yes" please specify when,where and in what position.

Do you have any relatives working at the SAFT Group of Companies? YES NO

If "Yes" please specify who and in which departments.

5. OPERATIONAL REQUIREMENTS

Hours of availability. You would be required to work flexible hours, be available on weekends and sometimes until late at night.

Will you be able to meet these requirements? YES NO

Any comments?

6. QUALIFICATIONS

Highest school Grade passed:

Highest Qualification:

Institution:

Date Qualified:

Other relevant qualification:

Institution:

Date Qualified:

7. REFERENCES

Company Name:

Position Held:

Contact Person Name:

Position of Contact Person:

Contact Phone Number: Employed from: d d m m y y To: d d m m y y

Reason for leaving:

Company Name:

Position Held:

Contact Person Name:

Position of Contact Person:

Contact Phone Number: Employed from: d d m m y y To: d d m m y y

Reason for leaving:

Company Name:

Position Held:

Contact Person Name:

Position of Contact Person:

Contact Phone Number: Employed from: d d m m y y To: d d m m y y

Reason for leaving:

8. CONSENT

The SAFT Group of Companies will perform integrity assessments prior to employment. An integrity assessment involves compiling a comprehensive background check relevant to the job that will be performed. One or more of the following methods are used:

1. Reference checks with referees supplied
2. Qualification check
3. Credit and/or Criminal Check

I herewith voluntary provide consent for an integrity assessment to be carried out on me. I accept that the integrity assessment is part of the pre-employment selection process and that the SAFT Group of Companies is under no obligation to make use of my services. Please note that the information gathered will be dealt with on a strictly confidential and discreet basis.

Is there any other information, which may have bearing on your suitability for the position? (for example: Criminal records, previous misconduct or dismissals)	YES	NO
Have you ever been found guilty of a criminal or civil offence?	YES	NO

If "Yes", please specify: Nature & Date:

Date: d d m m y y y y Place:

Signature:

9. DECLARATION

I, hereby declare that all the particulars and answers in this application form are true and no material fact has been withheld. I agree that this application and declaration shall be the basis of any contract between the SAFT Group of Companies and me and that withholding material information or failing to answer the questions correctly will constitute a breach of a condition of employment (if I am successful in my application) for which I may be dismissed.

Date: d d m m y y y y Applicant Signature:

Date: d d m m y y y y Company Representative Signature:

10. SUPPORTING DOCUMENTS

- ☐ Curriculum Vitae
- ☐ Certified Identity Document
- ☐ Proof of Residential Address
- ☐ Proof of Income Tax Number (IRP5 or Letter from SARS)
- ☐ Certified copy of Grade 12 Certificate (Grade 10 for Forklift Drivers)
- ☐ Copy of Drivers Licence (if applicable)
- ☐ Copy of Forklift Licence (If applicable)
- ☐ Certified copy of workers permit (if applicable)