

KNYSNA SEDGEFIELD HOSPICE

Job Application Form

(All information will be kept strictly confidential)

Position applied for _____

Surname _____ Title: _____

First Names _____ Sex: Male _____ Female _____

Nationality _____

ID/Passport No _____

Address _____

Contact Numbers:

Home _____ Work _____

Cellular _____

How would you describe your health _____

Valid Drivers License: Yes _____ No _____ Code/s _____

Do you own a car: Yes _____ No _____

Marital Status _____

Dependants: _____ Age: _____ School/Aftercare _____

Please give details of your last three jobs (starting with the most recent or current position you hold). If we have not allocated enough space, please attach an annexure to this form.

COMPANY	POSITION HELD	MAIN AREAS OF RESPONSIBILITY	REASON FOR LEAVING

Please give details of your qualifications:

Level/Type	Qualifications	Year Obtained
School /Exit		
Tertiary		

Tertiary		
Tertiary		
Courses		
Courses		
Courses		
Other		

Have you ever worked for a Hospice before? Yes _____ No _____

Name of Hospice _____ Position held _____

Language Proficiency – Please state whether Good / Fair / Poor

Language	Speak	Read	Write	Understand

Expected Salary per month _____

Notice Period _____

Current Benefits _____

Please supply work references from three people in the last three years

Contact Name	Company	Position Held	Contact Details

Have you ever been arrested or convicted for any offense or crime even though subject to a pardon, amnesty or other similar legal action in this or any other country? No _____ Yes _____

If yes, please give brief details _____

If your profession requires you to be a member of a regulating body, are you currently registered: Yes _____ No _____

I hereby declare that all the above information given by me is a correct and truthful account of my career records and personal details, and therefore have no objections to having my credit and criminal records checked by Knysna Sedgefield Hospice. This information will be treated as confidential. Should any information herein be incorrect and or false, or should there be any non-disclosure of information on my part I hereby indemnify the interviewers, and/or my previous employers against any action whatsoever which I may have in event of me not obtaining the position applied for. I hereby authorise any of my former employers to furnish their record of my services, my reason for leaving their employ, together with all other information they may have concerning me whether on record or not. I hereby release them and their company from any liability for any damage whatsoever for issuing the same.

Signature

Date