



SAPS PRELIMINARY TRAINEE APPLICATION FORM (2016/2017): MPUMALANGA

- Complete the form in your own handwriting in black ink
- Attach certified copies of:
 - Identity document (yourself / spouse / children)
 - Senior Certificate
 - Post school qualification (if applicable)
 - Driver's license-
 - Service Certificates of previous employers (if applicable)
 - Proof of residence

PERSONAL INFORMATION

PERSAL/ FORCE NUMBER (currently in SAPS, SANDF or another Public Service Department)																							
SURNAME																							
FIRST NAMES																							
IDENTITY NUMBER																							
ARE YOU A SOUTH AFRICAN CITIZEN?												YES						NO					
POSTAL ADDRESS												WORK ADDRESS											
												POSTAL CODE											
CODE												TELEPHONE (HOME)											
CODE												TELEPHONE (WORK)											
CELLPHONE												EMAIL											
AFRICAN			M	F	WHITE			M	F	COLOURED			M	F	INDIAN			M	F				

QUALIFICATIONS

ARE YOU IN POSSESSION OF A SENIOR CERTIFICATE OR A VOCATIONAL CERTIFICATE (SAFETY IN SOCIETY)?:																											
YES											NO																
SPECIFY NAME OF SCHOOL																											
POST SCHOOL QUALIFICATION (IF APPLICABLE, SPECIFY THE FOLLOWING):																											
INSTITUTION																											
DEGREE OR DIPLOMA																											
DRIVER'S LICENCE																											
DO YOU HAVE A DRIVER'S LICENCE?											YES						NO						Code (as it is appearing on the license card)				

CRIMINAL OFFENCES

HAVE YOU EVER BEEN FOUND GUILTY OF A CRIMINAL OFFENCE OR HAVE A PENDING CRIMINAL OFFENCE?											YES						NO				
DO YOU HAVE ANY TATTOO?.																YES			NO		

I ACCEPT THAT A LIMITED NUMBER OF POSTS IS AVAILABLE AND I WILL SUBJECT MYSELF TO THE SELECTION PROCESSES AS REQUIRED. I ALSO GIVE PERMISSION FOR REFERENCE CHECKS AND SECURITY SCREENING TO BE CONDUCTED. SHOULD I BE SUBJECTED TO MEDICAL EXAMINATION, THE RESULTS THEREOF MAY BE DISCLOSED TO THE RECRUITMENT PERSONNEL OR PERSONNEL DEALING WITH MY APPLICATION.

DATE: PLACE:.....SIGNATURE:.....