APPLICATION FORM

**- PLEASE COMPLETE ALL SECTIONS –**

(Please ensure that you sign and date the last page of this application form)

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Consultant Seeing |  |
| Surname |  | First Name |  |
| Nickname |  | Title (Mr/Mrs/Ms/Dr) |  |
| Position applying for |  | | |

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| --- | --- | --- | --- |
| Postal Address |  | | |
| Suburb/City |  | Postal Code |  |
| Physical Address |  | | |
| Suburb |  | Province |  |
| City |  | Postal Code |  |

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| --- | --- | --- | --- | --- | --- | --- |
| Tel no home |  | | Tel no work | |  | |
| Cell no |  | | E-mail Home | |  | |
| Skype Address |  | | Email Work | |  | |
| Tax Number |  | | Alt contact no | |  | |
| ***Other Contact Names (please give at least 3)*** | | | | | | |
| Name | Relationship |  | |  | |  |
|  |  | h) | | w) | | c) |
|  |  | h) | | w) | | c) |
|  |  | h) | | w) | | c) |

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| Languages Spoken | | |  | | | | | |  | | |  | | | |
| Languages Written | | |  | | | | | | | | | | | | |
| South African Citizen –ID no | | | | | | | |  | | | | | Age |  | |
| Permanent Residence – Give no | | | | | | | |  | | | | | | | |
| Work Permit – Validity Date | | | | | | | |  | | | | | | | |
| Passports – Validity Date | | | | | | | |  | | | | | | | |
| Other Citizenship - Specify | | | | | | | |  | | | | | | | |
| Advert – Name of paper/Website | | | | | | | |  | | | | | | | |
| Personal recommendation – Name | | | | | | | |  | | | | | | | |
| Other | | | | | | | |  | | | | | | | |
| Driver’s license | No | | | Light | | | Heavy | | | Commercial | PDP | Motor Cycle | | | Learners |
| Own Transport | | Yes | | | No |  | | | | | | | | | |

***PLEASE COMPLETE – USED FOR BEE / STATISTICAL PURPOSES ONLY***

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Birth Date | D | D | | M | M | | Y | Y | Race | | Black | Coloured | | Gender | | Male | | Female |
| Asian | White | |
| Smoker |  | | Marital Status | | | Married | | | | Single | | | No of Children | |  | | Ages of Children |  |
| Divorced | | | | Widowed | | |

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| ***REFERENCES*** | | | |
| Contact Name | Company | Position in Co | Contact Number |
|  |  |  |  |
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| ***Restraint of Trade –*** *Do you have a restraint of trade with your current Company? Please supply brief details if yes* |
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| ***Reason for wanting to make a career move:*** |
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| ***Names of Personnel Agencies already approached:*** |
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| --- | --- | --- |
| ***Companies Already Approached Over the Last 6 Months*** | | |
| Name of Company | For what position | Person seen/position |
|  |  |  |
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| Names of companies you would not like to work for: | | |
|  | | |
| Names of companies you would like to work for: | | |
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| Present health – Are you aware of any working conditions, which could be detrimental to your health? |
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| ***NOTE***: Should you not be successful for the specific position for which you have applied, indicate the types of occupation preferred in order of priority: | | |
| 1) | 2) | 3) |

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| --- | --- |
| Notice Period / Availability |  |

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| --- | --- | --- |
| Geographical areas preferred in order of priority: Rather give a wider choice if you’d be prepared to relocate for a good position, for example: 1- Gauteng, 2- Durban, 3- Anywhere in South Africa | | |
| 1) | 2) | 3) |

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| --- | --- | --- | --- | --- | --- | --- |
| ***REMUNERATION PACKAGE***  Complete only those sections that are applicable | | | | | Present Rand/Month | Envisaged/Expected Rand/Month |
| Monthly basic salary (before tax), excluding all allowances | | | | |  |  |
| Average Commission per month over last 6 months | | | | |  |  |
| Housing Subsidy | | | | |  |  |
| Full Company Car (model, year, replacement value) | | | | |  |  |
| Car Allowance | | | | |  |  |
| Petrol- Limited or Unlimited (Established Rands) | | | | |  |  |
| Car Maintenance | | | | |  |  |
| Car Insurance | | | | |  |  |
| Travel Allowance: c/km or monthly amount | | | | |  |  |
| Medical Aid | Co | % | Employee | % |  |  |
| Provident Fund | Co | % | Employee | % |  |  |
| Pension | Co | % | Employee | % |  |  |
| Retirement Annuity | | | | |  |  |
| Entertainment Allowance | | | | |  |  |
| 13th Cheque (Guaranteed or Performance Related) | | | | |  |  |
| Other bonus (give details, average per month) | | | | |  |  |
| Other allowances/benefits eg cellphone, computer | | | | |  |  |
| Student Loans – Amount Owing | | | | |  |  |
| Owing to whom eg Bank or Current Employer | | | | |  |  |
| Repayment method (R/month) | | | | |  |  |
| Net “take home” amount monthly | | | | |  |  |
| Value of yearly package cost to company | | | | |  |  |
| Next Salary Review Date | | | | |  |  |

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| Would you consider contract/temporary work | |  | |
| Rate expected per hour |  | Rate expected per month |  |

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| Have Your Ever Accepted A Counter-Offer From An Employer? (Yes/No) |  |

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| Do you have a criminal record / been convicted of any criminal or other offence? (Yes/No) |  |
| If yes, please give brief detail of offence: | |

***EDUCATION & TRAINING***

|  |  |  |
| --- | --- | --- |
| Highest Schooling Standard Achieved & Year | |  |
|  | | |
|  | | |
| Distinctions Obtained |  | |

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| ***TERTIARY EDUCATION / QUALIFICATIONS*** | | | |
| Qualification obtained/ Indicate  major subjects | Institution | From  To | Part/Full  Time |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Distinctions Obtained |  | | |

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| ***TRADE QUALIFICATION/S*** | |
| Qualification | Completion Date |
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| ***OTHER COURSES & TRAINING*** | | |
| Diploma/Certificate Obtained | Description of Course & Institution | Completion Date |
|  |  |  |
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| Distinctions Obtained |  | |

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| ***PROFESSIONAL MEMBERSHIPS*** | | | |
| Name of Institution | Membership Reg. No | Date Elected | Abbreviation |
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| Computer Literacy (list applications, level of proficiency) |
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| Provide 3 x Career Highlights: Which Company: When; where; How |
| 1. |
| 2. |
| 3. |

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| Do you intend to pursue any further studies? |  |

I attest that the above information is true and correct and by my signature below release Bristow Talent & Associates from any disputes that should arise as a result of incorrect information provided. I also authorize for any Credit and Criminal checks to be carried out.

Signature: Date: