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SECURITY CLEARANCE FORM

WARNING

THIS QUESTIONNAIRE IS A SWORN/AFFIRMED STATEMENT—ANY FALSE INFORMATION FURNISHED CONSTITUTES PERJURY

TO BE COMPLETED	BY THE INSTITUTION REQUESTING THE SECURITY CLEARANCE
NAME OF IMMEDIATE SU	PERVISOR/DELEGATED OFFICIAL:
TEL. ()	
LEVEL OF CLEARANCE:	
RECORD	
CONFIDENTIAL	
SECRET	
TOP SECRET	

DOCUMENTATION REQUIRED FOR SECURITY CLEARANCE

♣ Please supply the following documents with the Security Clearance form and indicate which have been submitted:

→ All copies should be <u>certified</u> as a true copy of the original document by a Commissioner of Oath.

1.	Copy of Identity Document (Applicant and Spouse /Cohabitant)	<u>Yes</u>	<u>No</u>
2.	Copy of Passport (Applicant and Spouse /Cohabitant) (Copies of all the pages, Blank pages as well)	<u>Yes</u>	<u>No</u>
3.	Copy of Marriage Certificate	<u>Yes</u>	<u>No</u>
4.	Copy of Divorce Certificate	<u>Yes</u>	<u>No</u>
5.	Copy of Academic Certificates (Matriculation Certificate to be included)	<u>Yes</u>	<u>No</u>
6.	I D Photo (X1)	<u>Yes</u>	<u>No</u>
7.	Ensure that your Declaration of Private Interest has been submitted on the SARS systems	<u>Yes</u>	<u>No</u>

NOTE below documents should only be submitted when requested by the person responsible for your clearance, as these can become outdated.

FINANCIAL DOCUMENTATION

When requested please supply bank statements of the past three (3) months. (All Transactions should reflect on these statements).

Cheque Account	<u>Yes</u>	<u>No</u>	Credit Card Account	<u>Yes</u>	<u>No</u>
Savings Account	<u>Yes</u>	<u>No</u>	Bond	<u>Yes</u>	<u>No</u>
Personal Loans	<u>Yes</u>	<u>No</u>	Car Loan	<u>Yes</u>	No
Study Loans	<u>Yes</u>	<u>No</u>	Other Financial Loans	<u>Yes</u>	<u>No</u>
Other Accounts	<u>Yes</u>	<u>No</u>	Copy of latest Salary Advice	<u>Yes</u>	<u>No</u>
Income and Expenditure form	<u>Yes</u>	<u>No</u>			

1. PERSONAL PARTICULARS

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CITIZENSHIP	(i)													(ii))							
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DATE OF CHA	NGE		(ii)			NAME CALLED BY															
	DATE OF BIRTH						PLACE OF BIRTH															
DAY	DAY MONTH					Υ	EAR		coul			COUNTI	NTRY PLACE			PLACE						
WORK TEL. No.									CELL	PHO	ON	E No.										

2. RESIDENTIAL ADDRESSES

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NUMBER AND	NAME OF STREET/FLAT OR NAME OF FARM	NUMBER AND	NAME OF STREET/FLAT OR NAME OF FARM						
CITY/TOWN		CITY/TOWN							
PROVINCE		PROVINCE	. `						
COUNTRY		COUNTRY							
TEL No.									
DATE OCCUPIED		DATE OCCUPIED							

3. EDUCATIONAL QUALIFICATIONS

KINDLY FURNISH THE FOLLOWING PARTICULARS REGARDING ALL SECONDARY AND TERTIARY EDUCATIONAL INSTITUTIONS (E.G. SECONDARY SCHOOLS, TECHNIKONS, COLLEGES AND UNIVERSITIES) THAT YOU HAVE ATTENDED:												
QUALIFICATIONS OBTAINED	NAME OF SCHOOL OR INSTITUTION	CITY/TOWN AND COUNTRY	FROM	то								

4. SPOUSE OR COHABITING PARTNER

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HAVE YOU EVER BEE	N TREATE	D FOR AL	COHOL AE	3USE?	? ,				YES		NO	$\overline{}$
HAVE YOU EVER BEE	N TREATE	D FOR D	RUG ABUS	E?	:				YES		NO	
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CONTIDENTIAL

7. RELATIVES: Include parents, parents in law, siblings and all children (not applicate to deceased persons)

RELATIONSHIP	PRESENT SURNAME	PREVIOUS SURNAME	FIRST NAMES	IDENTITY NUMBER	COUNTRY OF BIRTH	NATIONALITY	FULL RESIDENTIAL ADDRESS
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14. SERVICE IN SECURITY SERVICES (INCLUDING SAPS/FOREIGN SERVICES)

COUNTRY	SERVICE NUMBER	FROM	то	NAME OF SERVICE
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15. HAVE YOU EVER BEEN ISSUED WITH A SECURITY CLEARANCE/DENIED?

LEVEL	DATE ISSUED/DENIED	INSTITUTION								
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16. DECLARATION

(A) DO YOU KNOW AND UNDERSTAND THE CONTENTS OF THE ABOVE DECLARATION? ANSWER (B) DO YOU HAVE ANY OBJECTIONS TO TAKING THE PRESCRIBED OATH/AFFIRMATION? ANSWER (C) DO YOU CONSIDER THE PRESCRIBED OATH/AFFIRMATION TO BE BINDING ON YOUR CONSCIENCE? ANSWER (D) I CERTIFY THAT THE ABOVE QUESTIONS WERE PUT TO ME AND THAT THE ANSWERS, AS REFLECTED ABOVE, WERE WRITTEN DOWN IN MY PRESENCE. SIGNATURE OF DEPONENT (E) I CERTIFY THAT THE DEPONENT HAS ACKNOWLEDGED THAT HE/SHE KNOWS AND UNDERSTANDS THE CONTENTS OF THIS DECLARATION WHICH WAS SWORN TO/AFFIRMED BEFORE ME AND THE DEPONENT'S SIGNATURE/THUMB PRINT/MARK WAS PLACED THEREON IN MY PRESENCE. FULL FIRST NAMES AND SURNAME (Print) DESIGNATION (RANK)	10.	DECLARATION					:	·			
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