

G.P.S.



Republic of South Africa

Z83 (.....)

## APPLICATION FOR EMPLOYMENT

## WHAT IS THE PURPOSE OF THIS FORM

To assist a government department in selecting a person for an advertised post.

This form may be used to identify candidates to be interviewed. You need to fill in all sections of this form completely, accurately and legibly. This will help to process your application fairly.

## WHO SHOULD COMPLETE THIS FORM

Only persons wishing to apply for an advertised position in a government department.

## ADDITIONAL INFORMATION

This form requires basic information. Candidates who are selected for interviews will be requested to furnish additional certified information that may be required to make a final selection.

## SPECIAL NOTES

1 – All information will be treated with the strictest confidentiality and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in so far as it may be required and permitted by law. Your personal details must correspond with the details in your ID or passport.

2 – Passport number in the case of non-South Africans.

3 – This information is required to enable the department to comply with the Employment Equity Act, 1998.

4 – This information will only be taken into account if it directly relates to the requirements of the position.

5- The Executive Authority shall consider the criminal record (s) against the nature of the job functions in line with internal information security and disciplinary code.

6- The applicant may submit additional information separately where the space provided is not sufficient.

7- Departments must accept certified documents that accompany the application(s) with certification that is up to 6 months, unless the advert prescribes a longer period.

## A. THE ADVERTISED POST (All sections of this form are compulsory)

Position for which you are applying (as advertised) <b>DIRECTOR</b>	Department where the position was advertised <b>Provincial Treasury</b>
<b>INFORMATION TECHNOLOGY</b>	<b>MPUMALANGA PROVINCE</b>
Reference number (as stated in the advert) <b>MPT 02/2022</b>	If you are offered the position, when can you start OR how much notice must you serve with your current employer? <b>1 MONTH.</b>

B. PERSONAL INFORMATION<sup>1</sup>

Surname and Full names <b>SKHOSANA</b>		<b>LINGTON</b>	
Date of Birth <b>14/06/78</b>	Identity Number <b>7806145480086</b>	Passport number <b>A06359987</b>	
Race <sup>3</sup> <b>African</b>	White	Coloured	Indian
Gender <sup>3</sup>	Female	Male <input checked="" type="checkbox"/>	
Do you have a disability?		Yes	No <input checked="" type="checkbox"/>
Are you a South African citizen?		Yes <input checked="" type="checkbox"/>	No
If no, what is your nationality?			
Do you have a valid work permit? (only if non-South African)		Yes	No
Have you been convicted or found guilty of a criminal offence (including an admission of guilt)? <sup>5</sup>		Yes	No <input checked="" type="checkbox"/>
If yes (provide the details)			
Do you have any pending criminal case against you?		Yes	No <input checked="" type="checkbox"/>
If yes, (provide the details) <sup>5</sup>			
Have you ever been dismissed for misconduct from the Public Service? <sup>4</sup>		Yes	No <input checked="" type="checkbox"/>
If yes (provide the details) <sup>5</sup>			
Do you have any pending disciplinary case against you?		Yes	No <input checked="" type="checkbox"/>
If yes, (provide the details)			
Have you resigned from a recent job pending any disciplinary proceeding against you? <sup>4</sup>		Yes	No <input checked="" type="checkbox"/>
If yes, (please note that the provisions of the Public Service Act shall apply).			
Have you been discharged or retired from the Public Service on grounds of ill-health or on condition that you cannot be re-employed? <sup>4</sup>		Yes	No <input checked="" type="checkbox"/>
Are you conducting business with the State or are you a Director of a Public or Private company conducting business with the State? <sup>6</sup> If yes, (provide the details) <sup>6</sup>		Yes	No <input checked="" type="checkbox"/>
In the event that you are employed in the Public Service, will you immediately relinquish such business interests?		Yes <input checked="" type="checkbox"/>	No
Please specify the total number of years of experience you have		Private Sector <b>2Yrs 6Mth</b>	Public Sector <b>14</b>
If your profession or occupation requires official registration, provide date and particulars of registration		Date <b>N/A</b>	Reg. No

Initial. **L**.....


<p>8- Each application for employment form must be duly signed and initialed by the applicant. Failure to sign this form may lead to disqualification of the application during the selection process.</p>	<b>C. CONTACT DETAILS AND MEDIUM OF COMMUNICATIONS</b>				
	Preferred language for correspondence				ENGLISH
	Method for correspondence	Post	E-mail	Fax	Telephone <input checked="" type="checkbox"/>
	Contact details (in terms of the above)				
	078 346 8976				

<b>D. SOUTH AFRICAN OFFICIAL LANGUAGE PROFICIENCY – state 'good', 'fair', or 'poor'</b>					
	Languages (specify)				
	ENGLISH	SIWATI	N. SO THO	SETHWANA	XITSHONYA
Speak	GOOD	GOOD	GOOD	FAIR	FAIR
Write or read	GOOD	FAIR	GOOD	FAIR	FAIR

<b>E. FORMAL QUALIFICATION<sup>7</sup> (from highest to the lowest)</b>		
Name of School/Technical College	Name of qualification obtained	Year obtained
TECHNICON PRETORIA (AKA TUT)	NATIONAL DIPLOMA IN INFORMATION TECHNOLOGY	2003
UNISA	INFORMATION SECURITY	2008
UNIVERSITY OF PRETORIA	SENIOR MANAGEMENT PROGRAMME	2019
Current study (institution and qualification): ORACLE CERTIFICATION - UDEMY		

<b>F. WORK EXPERIENCE (Also attach a detailed CV)<sup>8</sup></b>						
Employer (including current employer)	Post held	From		To		Reason for leaving
BWC ORGANIZATION	SYSTEM ANALYST	06	04	12	05	CONTRACTED.
MCB (A.K.A MER)	I.T MANAGER	08	11	09	15	LACK OF GROWTH.
IUCMA	I.T MANAGER	10	15	NYA		CURRENT.
If you were previously employed in the Public Service, is there any condition that prevents your re-appointment						Yes <input checked="" type="checkbox"/> No
If yes, Provide the name of the previous employing department and indicate the nature of the condition.						

<b>G. REFERENCES</b>		
Name	Relationship to you	Tel. No. (office hours)
JM MALWELA	SUPERVISOR.	013 766 6911
CK CHILOANE	SUPERVISOR.	013 750 8010
ADV. B.M SHABANGU	SUPERVISOR.	013 753-9000

<b>DECLARATION</b>	
I declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information provided will result in my application being disqualified or disciplinary action taken against me if I am appointed.	
Signature: 	Date: 31/03/2022.



University of Pretoria

Executive Education

This is to certify that

*L Skhosana*

has successfully completed the

**Senior Management Programme**

**2019**



*Executive Manager: Training Solutions  
Enterprises University of Pretoria*

*Course Leader*

**Gordon Institute  
of Business Science**  
University of Pretoria

Reference : UN553291IAS  
Enquires : Tamara Abrahams  
Tel : 012 429 3285  
Fax: 012 429 3199  
Date : 29 September 2014

### STATEMENT REGARDING THE ISSUING OF A CERTIFICATE

It is hereby certified that

**Lington Skhosana**

Was issued with a

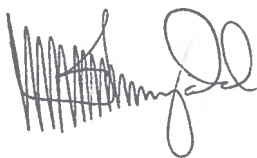
**Intermediate Archives and Records Management**

**26-30 August 2013**

Certificate On the

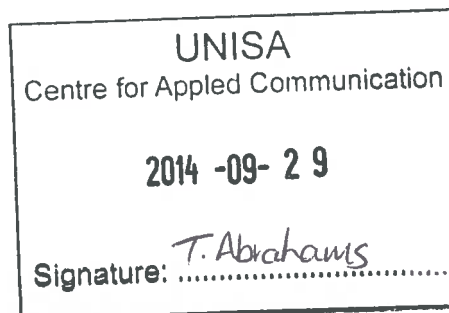
**17 March 2013**

This statement is issued in lieu of certificate, the original of which has been lost, stole or destroyed and is for employment purposes. Duplicate certificates are no longer issued.



**Head of the centre**

**26 September 2014**



Reference : UN541716ISA  
Enquires : Tamara Abrahams  
Tel : 012 429 3285  
Fax: 012 429 3199  
Date : 29 September 2014

**STATEMENT REGARDING THE ISSUING OF A CERTIFICATE**

It is hereby certified that

**Lington Skhosana**

Was issued with a

**Basic Archives and Records Management**

**14-17 August 2012**

Certificate On the

**11 March 2013**

This statement is issued in lieu of certificate, the original of which has been lost, stolen or destroyed and is for employment purposes. Duplicate certificates are no longer issued.



**Head of the centre**

29 September 2014

UNISA Centre for Applied Communication
2014 -09- 29
Signature: <i>T. Abrahams</i>



## ***Peakford Management Consultants***

### ***Certificate of Completion***

*This is to certify that:*

***Lington Skhosana***

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*Completed*

***Management Development Programme***

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***5—6 March 2015***





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*Principal*







I.D.No. 780614 5480 08 6  S.A. BURGER/S.A. CITIZEN		VANSURNAM <b>SKHOSANA</b> VOORNAM/FORENAMES <b>LINGTON</b>		GEBORTEDISTRIK OF LAND/ DISTRICT OR COUNTRY OF BIRTH <b>SOUTH AFRICA</b> GEBORTE DATUM/ DATE OF BIRTH <b>1978-08-14</b> DATUM UITGEDEK DATE ISSUED <b>2006-11-16</b> UITGEDEK OP GESAAG VAN DIE DIREKTUR-GENERAAL: BINNENLANDSE SAKKE VERREKEND BY AUTHORITY OF THE DIRECTOR-GENERAL: HOME AFFAIRS			
DISTEERDE WOON- EN POSADRES DEWYS VAN U GEREGISTREERDE WOON- EN ADRES VERANDER HET OF INDIEN BESONDERHEDEN VAN U STRAATNAAM, EN OF -NUMMER, EN, VERANDER HET, IN DIE IDENTITEITSKODOKUMENT IS, GEBRUIK WORD OM DIE E TREK EN MOET DIT INGEDIEN WORD BY OF GEPOS WORD LEK, DISKANTOOR VAN DIE DEPARTEMENT VAN SAKKE				ED RESIDENTIAL AND POSTAL ADDRESS IF OF YOUR REGISTERED RESIDENTIAL AND SS IN THIS POCKET			
echanged your address, or, if particulars of your e.g. name of street and or street number, etc., have e NOTICE OF CHANGE OF ADDRESS form in the k of the identity document must be used to report It must be handed in at or posted to the nearest Office of the DEPARTMENT OF HOME AFFAIRS							