



## NUWE HOOP SKOOL NEW HOPE SCHOOL

### APPLICATION FOR NEW HOPE SCHOOL VACANCIES (SGB)

#### 1. NOTES

This form requires basic information.

Please attach copies of:

CV

ID (certified) – not older than 3 months

All relevant qualifications (certified) – not older than 3 months

SACE (where applicable – Educators and Psychologists please attach)

This application form may only be emailed to [application@newhopeschool.co.za](mailto:application@newhopeschool.co.za) – please clearly indicate which position you are applying for on the email.

Applications close at 17:00 pm on the day of the closing date.

**Applications in hard copy will not be accepted.**

Successful candidates will be required to submit a police clearance to the school, once appointed.

#### 2. PARTICULARS OF ADVERTISED POST

Post Description (Available Post):	
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#### 3. PERSONAL PARTICULARS

SURNAME:				
NAME(S):				
PERSAL NO:				
I.D. NO.:				
GENDER (Male/Female/Other)	Male	Female		
RACIAL GROUP (For Employment Equity and Statistical Purposes)	African	Coloured	Indian	White
Do you have a disability?			Yes	No
Are you a South African citizen?			Yes	No
Do you have a WORK/PERMANENT residence permit?	N/A	Yes	No	
If yes, Permit Number/ID				
Are you professionally registered? <b>PLEASE STATE COUNCIL AND NUMBER (e.g. SACE) Yes/ No</b>			Yes	No
Council name and registration number:				

**4. CONTACT DETAILS**

Contact number:(    )	Alternative contact number: (    )
Physical Address:	E-mail address:
	Cell Number:
Name and contact details of Next to Kin:	Relationship:

**5. LANGUAGES**

LANGUAGES (Specify)	Example English																				
	G	F	P	G	F	P	G	F	P	G	F	P	G	F	P	G	F	P			
	o	a	o	o	a	o	o	a	o	o	a	o	o	a	o	o	a	o	o	a	o
	d	i	r	d	i	r	d	i	r	d	i	r	d	i	r	d	i	r	d	i	r
Speak		x																			
Write	x																				
Read			x																		
Teach		x																			

**6. COMPUTER LITERACY - state "good", "fair", "poor"**

Category	Typing			Internet e-mail	Microsoft Excel	Microsoft Word	Power-point	Other	
	G	F	P						
Rate	G	F	P						

**7. QUALIFICATIONS**

School/University/College	Qualification(s)	Subjects/Majors/ Specialisation	Year of Completion

**8. ADDITIONAL SKILLS CERTIFICATES OF OTHER COURSES ATTENDED**

Name of course	Service provider/Institution	Duration of course
1.		
2.		
3.		
4.		
5.		
6.		

**9. EXPERIENCE (Start with current employment)**

Position	Institution	Summarize duties	Post Level	Exact Dates in Current post		Total	
				From M / Y	To M / Y	Years	Months

**10. EXTRA AND CO-CURRICULAR ACTIVITIES (e.g. SBST, SPORTS)**

Type of Activity	Organisation	Duration
1		
2		
3		
4		
5		

**11. REFERENCES**

NAME	CONTACT DETAILS	RELATIONSHIP
1		
2		
3		
4		

**12. ADDITIONAL INFORMATION (MANDATORY)**

1. Do you have relatives/close friends working within New Hope School? Yes/No (Please circle and specify)

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2. Please provide any other details which may be relevant to the position you are applying for. (i.e. illness, disabilities, family commitments etc.)

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3. Have you ever been convicted of any criminal offence? Yes/No (Please circle)  
If yes, please provide details:

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**13. DECLARATION:**

I declare that the above information provided (including any attachments) is true and correct. I understand that any false or incorrect information could lead to my application being eliminated and me being discharged on account of misconduct if appointed.

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**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**DATE**