



military veterans

Department:
Military Veterans
REPUBLIC OF SOUTH AFRICA

INTERNSHIP PROGRAMME APPLICATION FORM

WHAT IS THE PURPOSE OF THIS FORM?

To assist the Department of Military Veterans in selecting candidates for the Internship Programme. This form may be used to identify candidates to be interviewed. Since all applicants cannot be interviewed, you need to fill in this form in full and accurately. This will help to process your application fairly.

WHO SHOULD COMPLETE THIS FORM?

Only candidates wishing to apply for the Internship Programme must be between the age of 18 and 35 years

ADDITIONAL DOCUMENTS REQUIRED

- Covering/Motivational letter
- Certified copy of the applicant's South African ID and Qualifications
- Full official academic record

NOTES:

This document is not in any way an agreement or commitment

The selection of learners is totally dependent on results obtained and the outcome of the selection process

State the name of your completed qualification in the block below: e.g. Bcom Economics

Qualification:

Reference Number of the Advertised Internship Placement as Indicated:

PART A: PERSONAL INFORMATION

Name: Surname:

ID Number: Date of birth:

*Gender: Male Female Please Indicate your Age

*Race African White Coloured Indian

Are You a South African Military Veteran's Dependent? Yes No

If "YES" Indicate the "Beneficiary force Number"

Is the force number registered on the Department of Military Veterans database Yes No



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Have you ever been convicted of a criminal offence or been dismissed from employment? Yes No

PART B : CONTACT DETAILS

Contact numbers: Cell: Home/Alternative:

Postal Address:

Email Address:

Alternative Email Address:

Province:

District :

Nearest Town/City

PART C: Educational particulars (Please complete in full)

SECONDARY EDUCATION: (please provide copy of certified matric results)

| Name of School | Highest Grade obtained | Subject | Level |
|----------------|------------------------|---------|-------|
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TERTIARY EDUCATION: (please complete for each qualification obtained or currently busy with and attach academic record. Start with the current studies or most recent completed qualification)



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PART D: OTHER INFORMATION

MEMBERSHIP OF COMMUNITY OR PROFESSIONAL ORGANISATION

| Association/ Organisation | Position | Activities | Duration |
|------------------------------|----------|------------|----------|
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WORK EXPERIENCE/VOLUNTEER WORK - Previous work experience (Starting with the most recent)

| Company | Start Date | End Date | Position | Reason for leaving |
|---------|------------|----------|----------|--------------------|
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COMPUTER LITERACY - Please indicate your current level of computer literacy

| Level | Basic | Intermediate | Advanced |
|------------------------|-------|--------------|----------|
| MS Word | | | |
| MS Excel | | | |
| MS PowerPoint | | | |
| MS Outlook | | | |
| Other (please specify) | | | |

REFERENCES - Please provide three referees who can be contacted for reference

| Name | Relation | Telephone number |
|------|----------|------------------|
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PART E: MOTIVATION

What kind of career are you looking for and what actions have you taken towards achieving this?

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List the leadership positions you hold/have held (e.g. Projects you have worked on). What impact have you made in these?

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What unique attributes do you have that sets you apart from others? Provide examples on how you display these attributes in your day to day life?

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How did you get to know about us? (E.g. Career Fair, University Presentation, Newspaper, Word of Mouth, etc)

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PART F: DECLARATION

- I understand that all the information provided in my application may be followed-up and I authorise the Department of Military Veterans to contact any relevant person or institution for relevant references.
- I declare that the above information to my knowledge is true and correct and accept that if it were to be found that I withheld any information, the application will be cancelled immediately.
- I authorise any school / university / employer to provide the Department of Military Veterans with relevant information that may be useful in making a decision.

SIGNATURE OF APPLICANT

Date: _____

SIGNATURE OF PARENT/ GUARDIAN - If still a minor

Date: _____

POSTAL AND PHYSICAL ADDRESS FOR SUBMISSION

| Postal Address | Physical Address |
|---|--|
| Department of Military Veterans Directorate: Human Resource Management PO Box 943 Pretoria 0001 | Department of Military Veterans Directorate: Human Resource Management 327 Corner Festival Street and Arcadia Street Hatfield Pretoria |
| OR MAILED THE COMPLETED DOCUMENT WITH CERTIFIED QUALIFICATIONS TO THE FOLLOWING EMAIL ADDRESS: hr.recruitment@dmv.gov.za | |

NB: KINI

NOTE THAT THIS FORM CAN BE DOWNLOADED FROM THE FOLLOWING WEBSITE:

www.dmv.gov.za or <http://www.dmv.gov.za/documents.htm>