

**MUNICIPAL INFRASTRUCTURE SUPPORT AGENT  
MISA YOUNG GRADUATE PROGRAMME**

**IMPORTANT INFORMATION**

- Please complete in black ink.
- Sections A to F should be completed in full. Incomplete forms will not be accepted. Please note, your application must include the following documents :-
  - Reference number of the applied discipline/position
  - Curriculum vitae
  - Certified copies of relevant qualifications
  - Certified copy of the South African identity document
- Applications that do not comply will not be considered

| A. POST PARTICULARS   |         |  |  |       |  |                       |          |     |        |      |  |  |
|---|---------|--|--|-------|--|-----------------------|----------|-----|--------|------|--|--|
| Programme: MISA Young Graduate Programme 2024/2025  |         |  |  |       |  |                       |          |     |        |      |  |  |
| Province in which the applicant choose to be placed :<br>(Please refer to MISA / COGTA website) |         |  |  |       |  |                       |          |     |        |      |  |  |
| State required discipline as per advert:  |         |  |  |       |  |                       |          |     |        |      |  |  |
| B. DETAILS OF THE APPLICANT   |         |  |  |       |  |                       |          |     |        |      |  |  |
| Title:  |         |  |  |       |  | Initials:             |          |     |        |      |  |  |
| Surname:  |         |  |  |       |  |                       |          |     |        |      |  |  |
| First Name(s):  |         |  |  |       |  |                       |          |     |        |      |  |  |
| Date of Birth:  |         |  |  |       |  | Are you a SA Citizen: | Yes      |     | No     |      |  |  |
| ID Number:  |         |  |  |       |  |                       |          |     |        | Age: |  |  |
| Please mark the relevant block  |         |  |  |       |  | Gender:               | MALE     |     | FEMALE |      |  |  |
| Race:   | AFRICAN |  |  | WHITE |  |                       | COLOURED |     | INDIAN |      |  |  |
| Do you have a disability as contemplated by the Employment Equity Act 55 of 1998?               |         |  |  |       |  |                       |          | Yes | No     |      |  |  |
| If yes, specify:  |         |  |  |       |  |                       |          |     |        |      |  |  |
| Do you have a previous criminal offence or pending criminal case(s)                             |         |  |  |       |  |                       |          | Yes | No     |      |  |  |
| If yes, specify:  |         |  |  |       |  |                       |          |     |        |      |  |  |

|  |  |
|--|--|
| <b>Residential Address:</b>            | <b>Postal Address: (If different from Residential address)</b> |
| <b>Contact Number:</b>                 | <b>Alternative Number:</b>                                     |
| <b>E-mail Address (If applicable):</b> |  |

**C. LANGUAGE PROFICIENCY- State 'good', 'fair' or 'poor'**

|   |                     |  |           |  |                         |
|---|---------------------|--|-----------|--|-------------------------|
| <b>Languages</b>  |                     |  |           |  |                         |
| <b>Speak</b>  |                     |  |           |  |                         |
| <b>Read</b>   |                     |  |           |  |                         |
| <b>Write</b>  |                     |  |           |  |                         |
| <b>What is your highest standard passed? (attach proof)</b> |                     |  |           |  |                         |
| <b>Do you have an additional completed qualification?</b>   | <b>Yes</b>          |  | <b>No</b> |  |                         |
| <b>If yes, specify: (attach proof)</b>                      |                     |  |           |  |                         |
| <b>Are you currently studying?</b>                          | <b>Yes</b>          |  | <b>No</b> |  | <b>If yes, specify.</b> |
| <b>Qualification:</b>                                       | <b>Institution:</b> |  |           |  |                         |

**D. WORK EXPERIENCE (If any)**

|   |  |             |           |                           |           |
|---|--|-------------|-----------|---------------------------|-----------|
| <b>Have you previously been employed by the Public Service?</b>               | <b>Yes</b>   |             | <b>No</b> |                           |           |
| <b>Have you previously been enrolled into one of the following programmes</b> | <b>Yes (If yes, put a cross on the relevant programme)</b> |             | <b>No</b> |                           |           |
| <b>Learnership</b>  |  |             |           |                           |           |
| <b>Apprenticeship</b>   |  |             |           |                           |           |
| <b>Experiential Learning</b>  |  |             |           |                           |           |
| <b>Employer (Including current employer)</b>                                  | <b>Position held</b>                                       | <b>From</b> | <b>To</b> | <b>Reason for Leaving</b> |           |
|   |  | <b>MM</b>   | <b>YY</b> | <b>MM</b>                 | <b>YY</b> |
|   |  |             |           |                           |           |
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**E. REFERENCES**

| <b>Name</b> | <b>Relationship to you</b> | <b>Contact Number (s)</b> |
|-------------|----------------------------|---------------------------|
|             |                            |                           |
|             |                            |                           |

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**F. DECLARATION:**

**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 supplied could lead to my application for the young graduate programme being disqualified.**

|                   |              |
|-------------------|--------------|
| <b>Signature:</b> | <b>Date:</b> |
|-------------------|--------------|