

PRELIMINARY TRAINEE APPLICATION FORM (2024/2025 INTAKE)

		Compl	ete the	form	in BL	ACK	K INK and attach UNCERTIFIED copies of:											
Identity Document	Driver's license (if applicable)					Senior Certificate / National Senior Certificate / National Certificate (Vocational)												
 Post school qualifi Academic records Degree) 	Proof of Residence													rtificates of previous (if applicable)				
PROVINCE						Ν	IEARE	ST PO	DLICE	STA	TION							
					PERS	SONA		ORM/	TION									
PERSAL/ FORCE NUMBER (currently in SAPS, SANDF or another Public Service Department)																		
SURNAME	SURNAME																	
FIRST NAMES																		
IDENTITY NUMBER												AGE						
CELLPHONE							E-MAIL:											
AFRICAN	M	=	WHITE		М		F		COL	OUR	ED	м	F	IN	IDIAN	1	М	F
PHYSICAL ADDRESS:																		
												COL	DE					
DO YOU HAVE A DRIVER'S LICENCE? EXPIRY DATE											V							
					(QUAI	IFICA		s				7					
ARE YOU IN POS (VOCATIONAL) LE	SESSION OF A	SENIO	R CER	TIFICA	ATE/ G	GRAD)E 12 (DR NA	TION	AL C	ERTIF	ICAT				YES		NO
WHAT AGGREGA		D YOU	OBTAII	N IN E	NGLI	ѕн о	N THE	SEN	OR CI	ERTI	FICAT	E (EC	6.1-7 C	DR A-F)			
ARE YOU IN POSSESSION OF A NQF 6 DIPLOMA/ DEGREE (POST SCHOOL QUALIFICATION)													YES		NO			
SPECIFY DEGREE / DIPLOMA / NATIONAL VOCATIONAL CERTIFICATE LEVEL 4																		
GENERAL QUESTIONS																		
ARE YOU A SOUTH AFRICAN CITIZEN?													YES		NO			
DO YOU HAVE ANY PHYSICAL DISABILITY?														YES		NO		
IF YES, SPECIFY TYPE OF DISABILITY																		
ARE YOU MENTALLY, MEDICALLY AND PHYSICALLY FIT? IF NO, PLEASE SPECIFY												YES		NO				
HAVE YOU EVER BEEN FOUND GUILTY OF A CRIMINAL/DEPARTMENTAL OFFENCE OR HAVE A PENDING CRIMINAL OFFENCE OR DEPARTMENTAL CASE?													YES		NO			
IF YES, SPECIFY:																		
DO YOU HAVE AN	IY TATTOO?	YES	NO				IFY PO RM / A			I BOI	DY							
WERE YOU PREV PUBLIC SERVICE	WERE YOU PREVIOUSLY EMPLOYED IN THE PUBLIC SERVICE? IF YES, SPECIFY: DEPARTMENT:												YES		NO			
DID YOU TERMINATE SERVICE VOLUNTARILY? N/A											YES		NO					
IF NO, SPECIFY T															I			
ARE YOU INVOLVED IN ANY OUTSIDE BUSINESS, ACTIVITIES OR HAVE ANY INTERESTS WHICH MAY												NO						
THE SUCCESSFUL CANDIDATE FOR APPOINTMENT AS A POLICE TRAINEE?												. 20						
IF YES, SPECIFY:											_							
ARE YOU CONDUCTING BUSINESS WITH THE STATE OR ARE YOU A DIRECTOR OF A PUBLIC OR PRIVATE COMPANY CONDUCTING BUSINESS WITH THE STATE? IF YES, PROVIDE DETAILS:												Ē	YES		NO			
ARE YOU A DIRECTOR OF ANY PUBLIC OR PRIVATE COMPANY?												,	YES		NO			
accept that a limited	d number of pos	ts is av	ailable a	and I w	/ill sul	bject	myself								by s	ubjectin		self to th
selection processes is subjected to medical	examination, the	results	thereof	may be	e discl	losed	to the						-	-				
that the information p	rovided by me in	tnis app	Discation	torm is	s true	and c	orrect.											
DATE:		PLAC	E:						S	SIGN	IATU	RE:						