

NEWCASTLE MUNICIPALITY VACANCIES

The following vacancy exist in the department as mentioned hereunder:-

DEPARTMENT : COMMUNITY SERVICES

| Position | osition Library Assistant : Post ID : COMM2572 | | | | | |
|------------------|---|--|--|--|--|--|
| Remuneration | R195 282,77 per annum (Task Grade 7) | | | | | |
| Qualifications | Matric (Grade 12) or equivalent Be able to read and write Braille Be able to communicate in two of the official languages (Isizulu, English and Afrikaans) Computer Literacy – JAWS | | | | | |
| Experience | 1 Year relevant experience | | | | | |
| | General library duties. Assist with the Mini Library for the Blind service. Assist visually impaired / blind patrons to use special devices. Document Reader Computer and Internet (JAWS programme) Daisy players / Victor Reader Assist with outreach programmes to visually impaired / blind library patrons. Teaching of braille – reading and writing. Any other work-related task delegated by supervisor. | | | | | |
| Where advertised | a professional and quality service in the dissemination of information. Internal / Newcastle Municipal Website | | | | | |

Detailed CV's can be placed in the box with the Security: Rates Hall, Tower Block, 1st Floor, Murchison Street, Private Bag X6621, NEWCASTLE, 2940. For further information you may contact the Chief Librarian : Community Services (Arts, Culture and Amenities) : Mrs A Botes at 034 – 328 7617.

- Canvassing for appointment will automatically disqualify an applicant.
- If no reply to your application has been received within 60 days of the closing date, you should consider your application as being unsuccessful.
- The Directorate : Human Resources will not accept responsibility for information not mentioned in applications.
- <u>NO</u> late applications will be accepted.
- NO e-mails or faxes will be accepted.
- The Directorate: Human Resources will not be held responsible for lost applications unless proof of submission can be supplied.
- All applicants may be required to undergo a proficiency test.
- **NO** applications shall be considered without certified copies of the original documents of qualifications.
- The Newcastle Municipality adheres to the provisions as contained in the Employment Equity Act to ensure representativity through the process of affirmative action.
- It would be expected of candidates to be subjected to thorough evaluations and that previous and current employers and references will be contacted. Verifications will be done on his / her qualifications, criminal and credit records.
- Applicants must have no criminal record or pending criminal/departmental or civil cases. The candidate will be required to
 disclose all financial interest and will be subjected to competency assessment.
- Applicants will be subjected to a vetting process which will include security screening and fingerprint verification.
- Applicants should be a South African citizen or permanent resident.

- <u>SHOULD</u> the candidate be successful in the interview and thereafter decline the offer, such candidate will be liable for all costs incurred to have the position re-advertised.
- The attached application form for employment must be completed in full, accurately, and legibly.
- All information relevant to a candidate must be provided on this form.
- Any additional information may be provided on the cv.

CLOSING DATE : 30 SEPTEMBER 2022



NEWCASTLE MUNICIPALITY

APPLICATION FOR EMPLOYMENT

| | HAT IS THE PURPOSE OF THIS DRM | A. THE ADVERTISED POST | | | | | | | |
|---|---|---|---------------------------------------|---------|--|------|---------|----------|--------|
| To assist the district municipality in selecting a person for an advertised post. | | | | | Newspaper where the position was advertised | | | | |
| | his form may be used to identify | | | | | | | | |
| candidates to be interviewed. Since all applicants cannot be inter- viewed, you need to fill in this form completely, accurately and legibly. This will help to process your application fairly. | | Reference number (if stated in the advert) | | | If you are offered the position, when can you start OR how much notice must you serve with your current employer? | | | | |
| | HO SHOULD COMPLETE THIS DRM | B. PERSONAL | INFC | RMATION | | | | | |
| | nly persons wishing to apply for an Ivertised position at Newcastle | Surname | | | | | | | |
| | unicipality. | First Names | | | | | | | |
| Α | DDITIONAL INFORMATION | Date of Birth | | | | | | | |
| | nis form requires basic information. Andidates who are selected for in- | ID number | | | | | | | |
| te | rviews will be requested to furnish Iditional certified information that | Race | / | African | Wh | nite | Coloure | ed | Indian |
| may be required to make a final selec- | | Gender | | | | | FEMALE | | MALE |
| tion. | | Do you have a disability? | | | | YES | | NO | |
| SPECIAL NOTES | | Are you a South African Citizen? | | | YES | | NO | | |
| 1. | All information will be treated with the strictest confidentiality and will | If no, what is your Nationality | | | | | | | |
| | not be disclosed or used for any other purpose than to assess the | And do you have a valid work Permit? | | | | YES | | NO | |
| | 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 | Have you ever been convicted of a criminal offence or been dismissed from employment? | | | | YES | | NO | |
| | or passport. | Do you have a driver's license? | | | | YES | | NO | |
| 2. | Passport number in the case of non-South Africans. | Are you comput | er lite | rate? | | | YES | | NO |
| 2 | | Are you disabled? YES NO If YES elaborate VES VES | | | | NO | | | |
| э. | This information is required to enable the department to comply with the Employment Equity Act, 1998. | Do you hold a professional membership with any professional body? If yes, provide information below | | | NO | | | | |
| 4. | This information will only be taken into account if it directly relates to the requirements of | Name of professional body Membersh number | | | | ip | Exp | iry date | |
| | the position. | C. HOW DO W | | | <u> </u> | | | | |
| J. Applications with substantial | | - | referred language for correspondence? | | | | | | |
| | experience must attach a CV. | Telephone number during office hours | | | | | | | |
| 6 | Correspondence | Physical Addres | S | | | | | | |
| υ. | Correspondence contact details (in terms of above) | | | | | | | | |

| Preferred method for correspondence | Post | E-mail | Fax |
|--|------|--------|-----|
| Correspondence contact details (in terms of the above) | | | |

| D. LANGUAGE PROFICIENCY – state 'good', 'fair' or 'poor' | | | | | | |
|--|-----------------------|--|--|--|--|--|
| | Languages (specified) | | | | | |
| | | | | | | |
| Speak | | | | | | |
| Read | | | | | | |
| Write | | | | | | |

| E. QUALIFICATIONS (please ignore if you have attached a CV with these details | | | | | | | |
|---|--|---------------|--|--|--|--|--|
| Name of School / Technical College | Highest qualification obtained | Year Obtained | | | | | |
| Tertiary education (a | complete for each qualification you obtain | ed) | | | | | |
| Name of Institution | Name of Qualification | Year Obtained | | | | | |
| | | | | | | | |
| | | | | | | | |
| Current study (institution and qualification | n) | | | | | | |

| F. WORK EXPERIENCE (please ignore if you have attached a CV with these details) | | | | | | | | | |
|---|------------------------------|-----------|----------|------------|----|-----------|----|--|----------------|
| From - to Employer (including current employer) | Post held | FROM | | ком то | | FROM TO R | | | on for ving |
| | | MM | YY | MM | YY | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| If you were previously employed in th that prevents your re-employment | e Public Service, indicate w | hether ar | y condit | ion exists | | YES | NO | | |
| If yes, provide the name of the prev | ious employing departmer | nt | | | | | | | |

| G. REFERENCES (please ignore if you have attached a CV with these details) | | | | | |
|--|--|--|--|--|--|
| Name | ne Relationship to you Tel. No. (office hours) | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| 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 being disqualified or my discharge if I am appointed. | | | | | | |
| SIGNATURE: | DATE: | | | | | |