



ANGLO AMERICAN PLATINUM - CV DATABASE REGISTRATION FORM

Form Completion Information:

- This form is applicable to unemployed local (host) community members to register their CVs in order to be considered whenever there is high volume contract or emergency work at **Anglo American Platinum** operations.
- Please tick the applicable tick box () where required and complete all columns. All mandatory fields are marked with an asterisk (*).
- **Incomplete registrations will not be considered.**
- **CV Database Registration Forms without a signature and stamp and/or copies of qualifications and/or licenses will not be considered.**

Surname*:		First Name*:	
ID Number*:		Contact Number*:	
Ethnic Origin*:	<input type="checkbox"/> African	<input type="checkbox"/> Coloured	<input type="checkbox"/> Indian
			<input type="checkbox"/> White
			<input type="checkbox"/> Other
Gender*:	<input type="checkbox"/> Female	<input type="checkbox"/> Male	Email Address*:
Do you have a Drivers License*?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, please indicate Code:
Do you have a disability*?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, please state nature of disability:
Residing Town*:		Residential Village*:	
Highest Grade Attained/ Passed*:		Name of School*:	
Subject & Marks attained*:		Subject & Marks attained*:	
Subject & Marks attained*:		Subject & Marks attained*:	
Subject & Marks attained*:		Subject & Marks attained*:	
Highest Tertiary education level attained*:		Name of qualification*:	

Please attach the following to this page:	
1. ID and / or Drivers License	2. Copy of CV (if you have one) and copies of all qualifications attained
SIGNATURE:	DATE:

Disclaimer

All information will be treated with confidentiality, and will not be disclosed or used for any other purpose than to assess the suitability of a person, except in cases as it may require and permitted by law.

Do you hereby authorize any representative of the duly appointed verification agents of Anglo American EMEA Global Shared Services, a division of Anglo American plc, to forward your identity number and any other relevant personal information of yours, to any government department or any other verification supplier or agency acting on behalf of Anglo American EMEA Global Shared Services or any other legal entity (including but is not limited to the SAPS, Criminal Record, Centre, Home Affairs, Department of Trade and Industry, Master of the High Court, Education and Training entities, previous employers as well as credit organizations) to verify your personal information, credentials and personal records.

Do you furthermore authorize all above mentioned entities and or persons to furnish all relevant information sought, regarding yourself as well as all records, certificates, licenses, criminal records, identity documents, education certificates as well as positions held at previous employers registered to your person or against your name or identity? Do you furthermore unconditionally indemnify Anglo American EMEA Global Shared Services Employee Services, its representative or its duly appointed verification agents as well as any of the entities mentioned above, against your liability that may result from furnishing information authorized in this regard.

I furthermore unconditionally indemnify Anglo American EMEA Global Shared Services, its representative or its duly appointed verification agents, as well as any of the entities mentioned above, against your liability that may result from furnishing information authorized in this regard.

You are aware that any false information furnished by you in this application may lead to an investigation, a disciplinary hearing, disqualification of employment and a possible discharge as this will constitute a loss of trust.

If this Application Form has been completed by a third party on your behalf, you have authorized this third party to do so and confirm that all the information regarding my personal details presented in this Application Form is true and correct.

Please indicate your consent by selecting: No Yes

For internal office use only – Approval from Social Performance Department		KING / KGOSI / WARD COUNCILLOR STAMP:
Approver Name:		
Approver Signature:		
Date		