



South African Police Service Internship Programme Application Form

NB: Please Complete the form in your own handwriting in black ink, applicants with disabilities may apply utilizing accessible methods of application (Documentation proof disability to be attached) and attach the following:

- Certified Copies of ID , Certified copies Senior Certificate and Qualifications (not older than three months)
- Comprehensive Curriculum Vitae

THE APPLICATION FORM IS NOT FOR SALE

A. APPLICATION FOR AN INTERNSHIP PROGRAMME

(Applicant allowed to apply for maximum of three (3) positions on each advert) Separate application form must be submitted for each reference number.

Field of Position for internship which you are applying for (as advertised)	
Reference number (as stated in the advert)	
If you apply for more than one (1) position, please indicate(Specify other posts reference numbers)	

B. PERSONAL INFORMATION

Surname				
First Names				
Date of Birth				
ID number				
Cell phone no/Alternative				
Residential Address (Attach Proof of Residence)				
Race	African	White	Coloured	Indian
Gender	FEMALE		MALE	
Do you have any disability?	YES		NO	
If yes, please specify				
Are you a South African Citizen?	YES		NO	
Have you ever been convicted of a criminal offence?	YES		NO	
If yes, give details of the case e.g. CAS no and Police Station				
Have you ever participated in an Internship programme before?	YES		NO	
If yes, please state the name of the Department or Company				
Were you ever employed by a state department before?	YES		NO	
If yes, please state the name of the Department				
Highest grade passed and year	Grade		Year	
Highest Qualification obtained and name of Institution				
Academic year				

C. 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. I also give permission for reference checks and security screening to be conducted.

Signature:	Date:
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