

Chief Albert Luthuli Municipality

The transparent, innovative, and developmental municipality that improves the quality of life of its people

HEAD OFFICE

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REGISTRATION FORM – DATABASE OF UNEMPLOYED GRADUATES

A. PERSONAL INFORMATION

Surname												
First names												
Date of birth												
ID Number												
Gender							Male	Female				
Do you have a permanent disability?							YES	NO				
If "yes" state nature of the disability and attach medical certificate												
Do you have a driver's license							YES	Code:				
							NO					

B. CONTACT DETAILS

Cell number 1											
Cell number 2											
E-mail address											
Preferred method of correspondence	Cellphone						E-mail				
Residential address											
Ward Number											

C. HIGH SCHOOL QUALIFICATIONS		
Name of School/ Technical College	Highest-school Qualification obtained	Year obtained

Computer literacy		
Name of Qualification	Name of Institution	Year Obtained

Tertiary Education (complete for each qualification you obtained)			
Name of Qualification	Name of Institution	Type of qualification (Degree, Diploma, Postgraduate)	Year Obtained

Current study (Institution and Qualification):

Have you completed an internship programme?	Yes	No
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If "yes", provide further details:

Name of Institution: _____ Year completed: _____

Declaration	
<i>I declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any information supplied could lead to my Registration Form being ineligible.</i>	
Signature:	Date:

Please attach certified copies of Identity Documents, Drivers Licence, Academic Qualifications, Proof of Residence and CV.