



**EPWP UNEMPLOYMENT APPLICATION (DATABASE) FORM
LEARNERSHIP / SKILLS PROGRAMME/ INTERNSHIP OPPORTUNITY**



EXPANDED PUBLIC WORKS PROGRAMME

Telephone Number: 044 803 1535/1531/ 1363/1328

Email: Carmen@edendm.gov.za/Henlene@edendm.gov.za; calvyn@edendm.gov.za; reginald@edendm.gov.za;

Please submit to the Eden District Municipal Offices (Riversdale, Ladismith, Knysna, Plettenbergbay, George, Oudtshoorn, Mosselbay

Initials, Name and Surname		Accredited Training /qualification received with proof attached to form			Please attach the following documents: ID Document Qualification Training Documents Driver's Licence CV		Household Information	
Initials:		Driver's License	Yes	No	Give name and telephone numbers of previous employer/s:		Number of persons in Household	
Name:		Type:	Code:				Numbers of persons working in Household	
Surname:		Highest qualification					Number of Children attending school in the Household	
ID Number:		Skills Program (Driver's license or First Aid Programmes applied for:						
Age:								
Tel/Cell no.								
Alternative contact number:								
Male		Female						
Do you have a disability	Yes	No			Write down what experience skills you have (important for the database and to look at type of jobs available)			
Physical Address								
Street Name							Date of completing this application form:	
Area								
Town							Signature that all information provided is correct	
Ward								
Name and contact details of somebody living with you at above address:								
							House Hold with no income/Unemployed DISABLED	