



GRADUATE-IN-TRAINING APPLICATION FORM

Kindly note that applications are only open to candidates in possession of Bachelors Degrees within the undermentioned fields of study.
Please be advised to tick the appropriate box below as per your acquired qualification.
Correspondence regarding the applications will be to the successful applicants only.

SURNAME:	
NAME:	
NATIONALITY:	
TELEPHONE NUMBERS:	
PERMANENT ADDRESS:	
EMAIL:	
IDENTITY NUMBER:	
DATE OF BIRTH:	
RACE:	
DISABILITY:	
HIGHEST QUALIFICATION OBTAINED:	
<i>BCOM ACCOUNTING</i> <input type="checkbox"/>	<i>BCOM AUDITING</i> <input type="checkbox"/>
<i>BCOM INFORMATION SYSTEMS</i> <input type="checkbox"/>	<i>BSc COMPUTER SCIENCE</i> <input type="checkbox"/>
INSTITUTION:	
YEAR OBTAINED:	
WORK EXPERIENCE:	
PERIOD OF WORK:	
OTHER:	
CURRENT EMPLOYMENT STATUS:	

SIGNATURE

DATE