

### FORM B: UNEMPLOYED SOCIAL AUXILIARY WORK DATABASE REGISTRATION FORM

1. PERSONAL DETAILS																		
SURNAME																		
FULL NAMES																		
IDENTITY NUMBER																		
GENDER (Mark X)		Male					Female											
Are you a person with DISABILITY (Mark X)		YES			NO													
If YES, please indicate type of disability (eg Visually impaired)																		
Provide Contact details below																		
Land line			E-mail Address						Cell number									
Provide details of your location																		
Province (Mark X where applicable)				EC	FS	GP	KZN	LP	MP	NC	NW	WC						
Indicate District/ Metro municipality :																		
Indicate Local Municipality:																		
2. INFORMATION ABOUT TRAINING																		
2.1. Provide name of training institution / Service provider																		
2.2. State student / registration number																		
2.3. Indicate duration of the training programme (eg 2 years)																		
2.4. State duration of training		Date of initial registration																
		Date of completion																
2.5. Specify qualification																		
3. EMPLOYMENT HISTORY (Complete if you were ever employed as social worker but now unemployed)																		
Have you ever been employed as a social auxiliary		YES			NO													
If YES specify		Employer																
Period of employment- FROM		y	y	y	y	m	m	d	d	TO	y	y	y	y	m	m	d	d
4. DETAILS OF CURRENT ACTIVITY AS UNEMPLOYED / NON- PRACTICING SOCIAL WORKER																		
Are you qualified but currently (Mark X where applicable)																		
4.1. Unemployed (not working) and staying at home (not earning any salary)		YES			NO													
4.2. Employed (you are working) but not practicing social work auxiliary		YES			NO													
4.3. If YES Indicate sector of employment (Mark X where applicable)																		
Private/ Business		Public Service			Non-Governmental Organisation													
Training/ research institution		Other sector (specify):																
4.4. Indicate status of employment																		
Temporary		Fixed contract			Permanent				Other									
<p><i>I declare that I fully understand that the information provided is true and correct, and that I qualify to register in the Department of Social Development database of unemployed Social Workers. I also understand that registration in the database is neither an application for employment nor a guarantee for employment by the Department of Social Development, other departments, and partners in the NGO or business sectors or any potential employers. Any advertisement and subsequent applications for employment will follow prescribed DPSA regulations, or any potential employer recruitment and appointment policies.</i></p>																		
Full names:																		
Signature:						Date:												