

Graduate Application Form

PERSONAL INFORMATION:

Title: Mr Mrs Ms Dr (Tick applicable box)

Surname: _____

First Names: _____

Preferred Name (if different): _____

Date of Birth: _____ Gender: _____

Race: _____ Disability: _____

HOME ADDRESS:

Unit Number: _____ Name of complex: _____

Street Number: _____ Street Name: _____

Suburb/District: _____ City/Town: _____

Postal Code: _____

POSTAL ADDRESS:

PO Box/Private Bag: _____ City/Town: _____

Postal Code: _____

Home telephone No: _____ Cellphone No: _____

E-mail address: _____

EDUCATION/QUALIFICATIONS:

Institution	Date Obtained	Qualification

Subjects in Final Year	Average Mark obtained

RESIDENTIAL STATUS: (mark with an X) and add further details below

SA CITIZEN	PERMANENT RESIDENCE PERMIT	TEMPORARY RESIDENCE PERMIT	WORK PERMIT

SA CITIZEN:

ID Number:														
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WORKING EXPERIENCE:

Name Of Comapny	Position Held	Duration

BUSINESS REFERENCES:

Please provide the name of your immediate Supervisor or Human Resources contact

Name of Referee	Position Held	Company - (include telephone number)

CONFLICT OF INTEREST:

Please advise of any possible conflicts of interest:

Any family members working in the MMC group?

Yes		If yes, name of Company and relationship:	
No			

Any family members working for the competitors companies?

Yes		If yes, name of Company and relationship:	
No			

Do you have any criminal records?

Yes		If yes, nature of record:
No		

Do you have a valid South African Drivers Licence?

Yes		Code:	Yes		Do you have your own transport?
No			No		

Other information that may be necessary to disclose:

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Motivation as to why you should be considered for this programme at Marsh.

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TRUTH AND CORRECTNESS OF INFORMATION SUPPLIED

I declare that the information supplied in this application form is true and correct. I understand that giving false information or failure to give the required information constitutes misrepresentation. In this event and in the event that an offer of employment is made to me, Marsh (Pty) Ltd reserves the right to withdraw the offer of employment or terminate the offer of employment.

Signed: _____

Name: _____

Date: _____