**The University of KwaZulu-Natal (UKZN) is committed to meeting the objectives of Employment Equity to improve representivity within the Institution. Preference will be given to applicants from designated groups in accordance with our Employment Equity Plan.**

**INSTITUTIONAL PLANNING AND GOVERNANCE DIVISION**

**GARDEN AND GROUNDS ATTENDANT**

**(PEROMNES GRADE 17)**

**CAMPUS MANAGEMENT SERVICES**

**WESTVILLE & EDG X 8; PIETERMARITZBURG X 17; HOWARD & MEDICAL SCH X 17**

**REF NO. 006/2019**

The Garden and Grounds Attendant provides a comprehensive service to the campus in the areas of lawn, garden and sports grounds maintenance, as well as nursery maintenance, plant decoration, in-door plants, landscaping and chemical treatments.

**Minimum Requirements**:

* Grade 8 with reading, writing and arithmetic
* At least two (2) months’ relevant experience in grounds or parks maintenance
* Working knowledge of herbicides, chemicals and pesticides.
* Basic safety knowledge
* Basic knowledge of garden machinery operation
* Basic numeracy and literacy skills

**The total remuneration package offered includes benefits.**

**The closing date for receipt of applications is 25 September 2019. Late applications will not be considered.**

**Applicants are required to complete the attached application form.**

**Completed forms must be delivered to the Human Resources offices at:-**

**Pietermaritzburg: College of AES – Room 111, 1st Floor, College Administration Building**

**Westville: Professional Services - 3rd Floor MW Makgoba Administration Building**

**Howard College: College of Health Sciences - Room 321, 3rd Floor Desmond Clarence Building, Howard College OR**

**Howard College: College of Humanities: Human Resources offices, Gate 6 Masizi Kunene Road**



**ISICELO SOMSEBENZI – ABASEBENZI ABASEKAYO**

Sicela ukukwazisa ukuthi izicelo zomsebenzi zamukelwa ngaleli fomu elisemthethweni kuphela. Kuzobhekwa imininingwane egcwaliswe kuleli fomu kuphela.

|  |
| --- |
| **Igama Lofaka Isicelo** |
| **Izinga** | **Amagama** | **Isibongo** |
|  |  |  |
| **Inombolo Yomsebenzi yase-UKZN**  |  |  |
| **Imininingwane Ngesikhundla Esikhangisiwe** |
| **Inombolo eyireferensi** |  |
| **Igama Lesikhundla** |  |
| **Uphiko** |  |
| **Imininingwane Yakho** |
| **Inombolo Kamazisi** | **Usuku Lokuzalwa** |
| **Uhlanga Um-Afrikha/Ikhaladi/OwaseNdiya/Omhlophe** | **Ubulili Owesilisa/Owesifazane** |
| **Ingabe unokukhubazeka? Uma impendulo ithi “yebo”, sicela ucacise**  |  |
| **Wake wagwetshwa? Uma impendulo ithi “yebo”, sicela ucacise** |  |
| **Wake waxoshwa umqashi waphambilini noma wasula emsebenzini ngoba ulindele ukuthi uzoxoshwa? Sicela usho isizathu uma impendulo ithi “yebo”**  |  |
| **Wake waqashwa eNyuvesi YaKwaZulu-Natal phambilini?**  |  |
| **Ingabe kukhona ohlobene naye kubasebenzi baseNyuvesi YaKwaZulu-Natal? Uma impendulo ithi “yebo”, sicela ucacise**  |  |
| **Imininingwane Yakho Yokuxhumana** |
| **Ucingo lwasekhaya:** | **Iselula:** |
| **I-Imeyili:** |  |
| **Ezemfundo** |
| **Igama Lesikole**  |  |
| **Izinga Lokugcina Eliphothuliwe/Ibanga Eliphasiwe** | **Usuku Lokuphothula** |
| **Iziqu/ Ukuqeqeshwa** |
| **Igama Lesikhungo** |  |
| **Igama Leziqu** | **Usuku Lokuphothula** |

**Umlando Wokuqashwa**

Sicela ukukwazisa ukuthi sinelungelo lokuxhumana nabaqashi bakho baphambilini ukuze siqinisekise imininingwane oyibhale lapha ngezansi, nokuthola ubufakazi ngomsebenzi wakho.

1. Igama Lenhlangano (lapho ugcine khona ukusebenza)

Igama lomphathi wakho nenombolo yocingo

2. Igama lenhlangano (ngaphambi kwale engenhla (1)

Igama lomphathi wakho nenombolo yocingo

3. Igama lenhlangano ngaphambi kwale engenhla (2)

Igama lomphathi wakho nenombolo yocingo

**Sicela uqaphele lokhu:**

1. I-UKZN inelungelo lokungaqashi muntu kulesi sikhundla noma isikhangise kabusha ukuze kwande isibalo sabazofaka izicelo.
2. I-UKZN inelungelo lokuqinisekisa imininingwane oyinikezile. Ngokugcwalisa futhi ubuyise leli fomu, ugunyaza i-UKZN ukuba ifake imininingwane yakho kwabangaphandle kwesikhungo abaqinisekisa ngawe, iziqu zakho, nokugwetshwa kwaphambilini kanye neminye imininingo ephatelene nokuyizidingo zomsebenzi.
3. Abaphumelele esigabeni sokuhlunga sokuqala kuphela abazothintwa. Uma singakuthinti kungakadluli amasonto amane, sicela uthathe ngokuthi awuphumelelanga.
4. **Sidinga amakhophi aqinisekisiwe omazisi/izitifiketi zesikole/izitifiketi zeziqu NDAWONYE naleli fomu lokufaka isicelo.**

Ngiyaqinisekisa ukuthi imininingwane engiyinikeze kuleli fomu iyiqiniso futhi iqondile.

Igama Usuku

Ukusayina



**APPLICATION FOR EMPLOYMENT - SUPPORT STAFF**

Please note that applications for employment are only received on this official application form. Only detail completed on this form will be considered.

|  |
| --- |
| **Applicant’s Name** |
| **Title** | **First Names** | **Surname** |
|  |  |  |
| **UKZN Staff Number** |  |  |
| **Advertised Position’s Details** |
| **Reference number** |  |
| **Post Title** |  |
| **Division** |  |
| **Personal Details** |
| **Identity number** | **Date of Birth** |
| **Race African/Coloured/Indian/White** | **Gender Male/Female** |
| **Do you have a disability? If answer is “yes” please specify** |  |
| **Have you ever been convicted of a criminal offence? If answer is “yes”, please specify** |  |
| **Have you ever been dismissed from a previous employer or resigned in contemplation of being dismissed? Please state reason if answer is “yes”** |  |
| **Have you previously been employed by the University of KwaZulu-Natal**  |  |
| **Are you related to any current staff member/s of the University of KwaZulu-Natal? If answer is “yes”, please specify** |  |
| **Personal Contact Details** |
| **Home phone:** | **Cell phone:** |
| **Email address:** |  |
| **Schooling** |
| **Name of School**  |  |
| **Highest Standard / Grade passed** | **Date completed** |
| **Qualifications / Training courses** |
| **Name of Institution** |  |
| **Name of Qualification(s)** | **Date completed** |

**Employment History**

Please note that we reserve the right to contact your previous employers to verify the information you provide below, and to obtain references on your work.

1. Name of organization (where you last worked)

Name of your manager and contact number

2. Name of organization (prior to (1) above)

Name of your manager and contact number

3. Name of organization (prior to (2) above)

Name of your manager and contact number

**Please note that:**

1. UKZN reserves the right not to fill the post or to re-advertise to widen the pool of applicants.
2. UKZN reserves the right to do a complete verification of the information you have provided. By completing and submitting this form, you authorize UKZN to submit your personal details to our external service providers to verify your identity, qualifications, previous criminal convictions and any other data related to minimum requirements.
3. Only short listed candidates will be contacted. If you do not hear from us within four weeks of the closing date please assume you were unsuccessful.
4. We require certified copies of all identity documents/school certificate/qualification certificates TOGETHER with this application form.

I confirm that the information provided on this application form is true and accurate.

Name Date

Signature