

# **PROVINCIAL TREASURY**

# CHARTERED ACCOUNTANTS ACADEMY (CAA) SELECTION FORM (TE008)

#### WHAT IS THE PURPOSE OF THIS FORM?

To assist the Limpopo Treasury in selecting and identifying candidates for the Chartered Accountants Academy (CAA) interviews.

The form must be completed in full and accurately. This will help to process your application fairly.

#### WHO SHOULD COMPLETE THIS FORM?

Candidates applying for the Chartered Accountants Academy.

### **ADDITIONAL DOCUMENTS REQUIRED**

- Covering/Motivational letter
- Certified copy of the applicant's South African ID
- Full official academic certificates and transcripts

#### **NOTES**

**PART A** 

Date of birth

Gender

This document is not in any way an agreement or commitment.

The selection of trainees is totally dependent on results obtained and the outcome of the selection process.

All applications to reach Limpopo Treasury by 25 November 2022, at 14h00 No late applications will be accepted.

State the name of your qualification (current or already completed) in the block below: e.g. Certificate in the Theory of Accounting (CTA) or Post Graduate Diploma in Accounting (PGDA)
Are you a Limpopo Treasury or Thuthuka bursary holder?  Yes  No
PART B: PERSONAL INFORMATION
Surname
Name
ID Number

Race					
Disability					
Yes No			e or been dismissed f		
If your profession	or occupation	requires registrati	on, provide date and	particulars of registra	ation.
* For statistical p	urposes only.				
PART C: CONTA	CT DETAILS				
Contact numbe	r (cell)				
Alternative num	ber				
Postal address					
E-mail address					
PART D: EDUCA	TIONAL DETAIL	S (Please complet	e in full)		
HIGH SCHOOL ED	UCATION				
Name of School		Highest Grade obtained	Subjects		Level

TERTIARY EDUCATION (Please complete for each qualification obtained or currently busy with and attach academic record. Start with the current studies or most recent completed qualification).

Name of institution	Degree	Major subjects	Year obtained if completed

#### PART E: OTHER INFORMATION

#### MEMBERSHIP OF COMMUNITY OR PROFESSIONAL ORGANISATION

Organisation/Association	Position	Activities	Duration

## **WORK EXPERIENCE – Previous work experience (start with most recent)**

Company/ Organisation	Start date	End date	Position	Reason for leaving

**COMPUTER LITERACY – Please indicate your current level of computer literacy** 

	Basic		Intermediate		Advanced
MS Word					
MS Excel					
MS PowerPoint					
MS Outlook					
Other (please specify)					
EFERENCES – Please pi Name and Surname	rovide thre	ee referees wh Relati			rence number
PART F: MOTIVATION  What kind of career are			at actions have yo	ou taken to	owards achieving this
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What unique attributes do you have that set you apart from others? Provide examples on how you display these in your day to day life.
How did you get to know about us? (E.g. Career Fair, University Presentation, Newspaper, Word of Mouth, etc)
PART G: DECLARATION
<ul> <li>I understand that all the information provided in my application may be followed-up and authorise the Limpopo Treasury to contact any relevant person or institution for relevant references.</li> </ul>
<ul> <li>I declare that the above information to the best of my knowledge is true and correct and accept that if it were to be found that I withheld any information, the application will be cancelled with immediate effect.</li> </ul>
<ul> <li>I authorise any school/ university/ employer to provide Limpopo Treasury with relevan information that may be useful in making a decision.</li> </ul>
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