



education

Department of
Education
FREE STATE PROVINCE

FREE STATE DEPARTMENT OF EDUCATION

NOTICE

INVITATION FOR APPLICATIONS FROM ONLY UNEMPLOYED QUALIFIED EDUCATORS

HUMAN RESOUC E ADMINISTRATION CIRCULAR NO 10 OF 2022

I encourage all unemployed qualified educators to view this invitation as an opportunities to make a contribution to the reconstruction and development of Education in our Province.



SUPERINTENDENT-GENERAL

DATE: _____

15/4/2022

This circular is attached for your attention and information. Kindly bring the contents thereof to the attention of all personnel concerned.

Employees and parties, who fall under the jurisdiction of District Office and who experience a need for guidance in the interpretation of this circular, should address enquiries to the relevant District Office.

1.1 DATE OF COMMENCEMENT OF DUTY

As soon as possible should you be contacted ONLY after registering on the Free State Database

1.2 CLOSING DATE FOR APPLICATIONS

30 June 2022 at 16h00

2. INVITATION FOR APPLICATIONS FROM UNEMPLOYED QUALIFIED EDUCATORS

- 2.1 The Free State Department of Education (**FSDoE**) envisages filling a number of vacant educator posts by placing unemployed qualified educators in a full-time or part time capacity at various schools across the Free State Province.
- 2.2 Interested unemployed qualified educators are kindly invited to submit their applications as soon as possible. Former educators who have terminated their services with voluntary Severance Package (**VSP**) or who have retired as well as educators from foreign countries registered with **SACE** and with a valid work and residence permits who are in possession of certified education qualifications verified by **SAQA/DoE** may also apply:
- 2.3 **Only the attached** application form is to be submitted when applying and there is no need to apply for all the Districts (Only 1 application form will serve across the province) – **Please don't re-apply when you have already applied and have a reference number**

3. PROCEDURE WHEN APPLYING

- **The attached application form must be fully completed and signed**
- **A fully compiled Curriculum Vitae must be attached**
- **Certified copies of all qualification certificates must be attached**
- **Certified full academic records of all qualifications obtained**
- **Certified copy of ID/Passport document**
- **Valid Certified copy of Provisional/SACE certificate**
- **Tax Number from SARS**
- **Vetting letter from Department of Social Development and or proof that you have applied for it through the attached FORM 30 BELOW (Please liaise with Department of Social Development on where and how to send the form)**

6. APPLICATIONS SHOULD BE SENT TO OR HANDED IN AT THE FOLLOWING ADDRESSES:

6.1 HEAD AND DISTRICT OFFICES

1. The Director: Xhariep District Office
Private Bag X 20513
BLOEMFONTEIN
9300

China Mall
Rudolf Greyling Number 9 Estoire
BLOEMFONTEIN
9301
2. The Director: Motheo District Office
Private Bag X20565
BLOEMFONTEIN
9300

C/O St Andrew & Markgraaf Street
BLOEMFONTEIN
3. The Director: Lejweleputswa District Office
Private X 30
WELKOM
9460

31 Mooi Street
Old Wooldworths Building
WELKOM
9460
4. The Director: Thabo Mofutsanyana District
Private Bag X 817
WITSIESHOEK
9870

Parliament Building (On the mountain)
PHUTHADITJABA
5. The Director: Fezile Dabi District
Private Bag X 2007
SASOLBURG
9570

23 Totius Street
Old Cedar School Building
SASOLBURG
6. The Director: Old Saambou Building, Portion of Ground & First Floor
Cnr Charlotte Makgomo Maxeke & Aliwal Street, Bloemfontein, 9301

NB: Only PGCE Students must submit at Saambou Building address, but all other qualifications must be submitted to the District near you. Database is provincial, so please just submit once.



APPLICATION FORM TO BE REGISTERED ON THE DATA-BASE FOR UNEMPLOYED EDUCATORS

1. PERSONAL PARTICULARS

SURNAME							
FULL NAMES							
PERSAL NUMBER (IF PREVIOUSLY EMPLOYED)							
IDENTITY NUMBER				TAX NR			
AGE		RACE	AFRICAN	COLOURED	INDIAN	WHITE	
GENDER				MALE		FEMALE	
ARE YOU DISABLED? IF YES SPECIFY:				YES		NO	
ARE YOU A SOUTH AFRICAN CITIZEN? IF NO SPECIFY				YES		NO	
IF YOU HAVE BEEN EMPLOYED BEFORE IN THE PUBLIC SERVICE, HOW WAS YOUR SERVICE TERMINATED?		VSP	RESIGNED		ILL-HEALTH	OTHER (SPECIFY)	
PROFESSIONAL REGISTRATION i.e.(SACE and registration nr)							
TELEPHONE NUMBERS : OWN:						ALTERNATIVE:	
E-MAIL ADDRESS							
<u>RESIDENTIAL ADDRESS:</u>						<u>POSTAL ADDRESS:</u>	

2. INDICATE TERTIARY INSTITUTION(S) WHERE YOU OBTAINED YOUR QUALIFICATION(S)

INSTITUTION	INSTITUTION	Name of Qualification(s)	Major Subjects	Medium of Instruction	Date Obtained
School					
College					
University					
University					
University					

3. EXPERIENCE (Only teaching experience if any – your teaching practical’s are also relevant)

	Name of School	Rank	Subjects & GR's	STATE EXACT DATES		
				From	To	Total
TEACHING						
						TOTAL:

4. **CRIMINAL RECORD** YES: _____ NO: _____

4. BURSARIES:

Has a bursary been granted to you by the FSDOE: Only Full Time or Department of Basic Education: Funza Lushaka (If YES , please circle the specific department) and indicate in which year it was allocated:	YES	NO
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I hereby declare that the information provided (including my attachments) is complete, correct and the truth.

DATE:

SIGNATURE:

INQUIRY BY PERSON TO ESTABLISH IF HIS / HER NAME IS INCLUDED IN PART B OF NATIONAL CHILD PROTECTION REGISTER (REGULATION 50(1)(b))[SECTION 126(3) OF THE CHILDREN’S ACT, (No 38 OF 2005)]

TO: The Director-General
 Department of Social Development
 Child Protection Register
 Private Bag X901
 Pretoria
 0001

Dear Sir / Madam

In terms of section 126(3) of the Children’s Act, (No. 38 of 2005), I _____

_____ (full names and surname) wish

to enquire whether my name is included in Part B of the National Child Protection Register. A certified copy

of one of the following documents is attached as verification of my identity.

<p>1. IDENTIFYING DOCUMENTS:</p> <p><input type="checkbox"/> birth certificate (only if not in possession of identity document or passport)</p> <p><input type="checkbox"/> identity document</p> <p><input type="checkbox"/> passport</p> <p><input type="checkbox"/> other</p>

In the event that my name has been included in Part B of the Register, kindly furnish reason why this was done.

My personal details are:

2. CONTACT DETAILS:	
Postal address:	Physical address:
* Email:	
Telephone No:	* Cellular No:

(* - if applicable)

Please note that section 126 of the Act requires you to respond to this inquiry within 21 working days.

Yours sincerely

(Signature)

(Date)

Kindly note that in the event that information becomes available that you are unsuitable to work with children, the Director-general reserves the right to enter your name on Part B of the Register, of which you will be duly notified. In terms of section 121 of the Children’s Act, you have the right to appeal against such finding, or have the finding reviewed by a Court of Law.