

Application checklist (All documentation must accompany your application)		
Document name	Description	Check
<b>1. Qualification</b>	Certified copied of your matric certificate with Mathematics or Mathematics literacy for CNC Processing. Computer Literacy	
<b>2. Identity</b>	Certified copy of your green ID document or smart ID (Both sides)	
<b>3. CV</b>	An updated curriculum vitae/resume	
<b>4. Proof of Residence</b>	Certified affidavit or account in your name or letter from the mayoral or municipal zone office	
<b>5. Proof of UNEMPLOYMENT</b>	Certified and signed affidavit confirming you are committed to the program for 12 months, have no job and have never participated in a learnership programme before	

Interested candidates are invited to send their resume and the completed application form to [recruitment@mpstainless.co.za](mailto:recruitment@mpstainless.co.za) with the subject line "CNC Processing NQF Level 4 Application". The application form can be collected at 12 Dr. Mandela Drive, Middelburg, or downloaded from our website [www.mpstainless.co.za](http://www.mpstainless.co.za)

For any queries regarding the vacancy, please contact the Human Resources Department at [precillan@mpstainless.co.za](mailto:precillan@mpstainless.co.za) or [petuniam@mpstainless.co.za](mailto:petuniam@mpstainless.co.za) or call 013 246 1528.

**We wish you all the success with your skills development program!**

SECTION A: PROGRAM DETAILS	
The Level of Skills Development Program you are applying for (as advertised)	
Application Reference Number	SDP/24_____

SECTION B: DETAILS OF APPLICANT									
Title				Initials					
Surname									
First Name(s)									
Date of birth				Are you a SA Citizen			Yes		No
ID Number							Age		
GENDER		Male	Female	RACE GROUP		African	White	Coloured	Indian
Do you have a previous and or pending criminal record or case (s)							Yes		No
If yes, specify									
Do you have a disability, as contemplated by the Employment Equity Act 55 of 1998?							Yes		No
Specify any other conditions; if any									
Do you require the assistance of another person(aid) while attending with the theoretical and practical training?							Yes		No
Ring Nature of Disability		Deaf	Blind	Hard to Hear	Visually Impaired	Loss Speech	Learning Disability	Paralysis / Quadriplegic / Wheelchair Bound	Other
If Other; specify									
Residential Address					Postal Address, if different from Residential Address				

**Mpumalanga Stainless Initiative - MSI CANDIDATE APPLICATION FORM**

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<b>Email Address</b>	
<b>Contact Number</b>	

<b>SECTION C: Language Proficiency – State “Good”, “Fair” or “Poor”</b>					
<b>Languages</b>					
<b>Speak</b>					
<b>Read</b>					
<b>Write</b>					
<b>What Level of Qualification? (Attach Proof)</b>					
<b>Do you have an additional completed qualification?</b>				Yes	No
<b>If yes; Specify (Attach Proof)</b>					
<b>Are you currently studying</b>				Yes	No
<b>If yes; Specify (Attach Proof)</b>					
<b>Have you previously undertaken a Learnership?</b>				Yes	No
<b>If yes; Specify (Attach Proof)</b>					
<b>Have you previously undertaken an incubation programme?</b>				Yes	No
<b>If yes; Specify (Attach Proof)</b>					
<b>If you are employed, when did you start working?</b>					
<b>Employer Name (Attach Proof)</b>					

<b>SECTION D: NEXT OF KIN</b>		
<b>Name</b>	<b>Relationship to you</b>	<b>Contact Number</b>

Please respond by ticking beneath YES or NO in the space provided

<b>SECTION E: GENERAL QUESTIONS</b>		
<b>Question</b>	<b>YES</b>	<b>NO</b>
1. Do you have family support?	<input type="checkbox"/>	<input type="checkbox"/>
2. Would you describe yourself as being computer literate?	<input type="checkbox"/>	<input type="checkbox"/>
3. Would you have financial access to public/own transport?	<input type="checkbox"/>	<input type="checkbox"/>
4. Would you have financial access to food/lunch/subsistence?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you accept and understand, that on completion of this qualification, you must start your own business in the Steel Sector?	<input type="checkbox"/>	<input type="checkbox"/>

Please provide a motivation as to why you believe you should be chosen for this program?

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## Entrepreneurial Section Evaluation

You need to think about why you would like to own your own business. What makes you think you will be Successful in business?

Some business development materials start out with a dissertation on the characteristics of the business owner in order to help you decide if you should go into business for yourself. These questions deal with the basic personality of potential entrepreneurs.

Are you "entrepreneurial" enough to build a business?

Do you know what the meaning of the word "entrepreneurial"?

Are you a risk taker?

Did you get good grades in school? Did you know many successful entrepreneurs did not?

You are a cautious person and a good student. Should you forget the whole thing? That's what some entrepreneurial tests would suggest.

However, there are many successful business owners who, as an adolescent, were team players, athletes, school leaders, excellent students, and never seriously questioned the status quo. Often, though, a tendency toward caution is not typical of many successful entrepreneurs. Most entrepreneurs tend to be maverick personalities with risk-taking vision and courage. Many entrepreneurs tend to be just a bit "offbeat" and they sometimes need to be in order to creatively grow a successful business.

Obviously, there is no set formula for success. However, the following entrepreneurial test may help you in your personal evaluation process. You just need to remember that this is simply a tool. It is fun to take and fun to interpret, but you should keep it in perspective.

<b>You must answer ALL questions for the evaluation to be accurate.</b> Place an X in the appropriate box for each question.
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- |   |     |                          |       |                          |    |                          |
|---|-----|--------------------------|-------|--------------------------|----|--------------------------|
| 1) I'm persistent. I am persistent.                               | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2) When I'm interested in a project, I need less sleep.           | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3) When there's something I want, I keep my goal clearly in mind. | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4) I examine mistakes and I learn from them.                      | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5) I keep New Year's resolutions.                                 | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 6) I have a strong personal need to succeed.                      | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 7) I have new and different ideas.                                | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 8) I am adaptable.  | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 9) I am curious.  | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 10) I am intuitive.   | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 11) If something can't be done, I find a way.                     | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |

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- |   |     |                          |       |                          |    |                          |
|---|-----|--------------------------|-------|--------------------------|----|--------------------------|
| 12) I see problems as challenges.   | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 13) I take chances.   | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 14) I'll gamble on a good idea even if it isn't a sure thing.             | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 15) To learn something new, I explore unfamiliar subjects.                | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 16) I can recover from emotional setbacks.                                | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 17) I feel sure of myself.  | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 18) I'm a positive person.  | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 19) I experiment with new ways to do things.                              | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 20) I'm willing to undergo sacrifices to gain possible long term rewards. | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 21) I usually do things my own way.                                       | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 22) I tend to rebel against authority.                                    | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 23) I often enjoy being alone.  | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 24) I like to be in control.  | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 25) I have a reputation for being stubborn.                               | Yes | <input type="checkbox"/> | Maybe | <input type="checkbox"/> | No | <input type="checkbox"/> |

**Disclaimer:**

**I accept that the completion of this application does not constitute automatic acceptance or approval by MSI into any of its goods or service offerings.**

**I further declare that all the information as completed herein by is verifiable, accurate and true.**

**I understand that any false information supplied could lead to my application for this Skills Development Program being DISQUALIFIED and acknowledge that this is NOT a JOB OFFER or any FUTURE PROMISE of a JOB.**

.....  
**Applicant Signature**

.....  
**Date**