



**ACADEMY APPLICATION FORM**

**APPLICATION FORM FOR THE MULTICHOICE TALENT FACTORY SOUTH AFRICA ACADEMY**

Kindly complete ALL the information required, provide all the supporting documents listed below and email directly to: [mtfza@multichoice.co.za](mailto:mtfza@multichoice.co.za).

| 1. List of Documents  | Submitted |    |
|---|-----------|----|
|   | Yes       | No |
| • CV – not more than 2 pages  |           |    |
| • Personal motivation letter of not more than 500 words (why should you be chosen?) |           |    |
| • Copy of South African Identity Document - certified                               |           |    |
| • Copy of matric certificate - certified  |           |    |
| • Copy of academic transcripts / Tertiary qualification Certificate - certified     |           |    |
| • Confirmation of banking details – verified by bank with bank stamp and/or letter  |           |    |
| • Proof of residential address  |           |    |

## 2. Personal Details (Please write clearly and in block letters)

|  |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
|--|---------------------------------|-----------|--|-------|-------------------------|------|--------|--|--|--|--|--|--|
| Surname  |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
| Full Names                                       |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
| Race<br>(Please tick)                            | African                         | Indian    | Coloured                                       | White | Gender<br>(Please tick) | Male | Female |  |  |  |  |  |  |
| RSA Identity<br>Number                           |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
| Disability<br>(please tick)                      | <b>Yes</b>                      | <b>No</b> | <b>If yes, please indicate disability type</b> |       |                         |      |        |  |  |  |  |  |  |
| Residential<br>address (please<br>list province) |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
|  |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
|  |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
| Postal Address                                   |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
|  |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
|  |                                 |           |  |       |                         |      |        |  |  |  |  |  |  |
| Contact details                                  | Home telephone (dialing code)   |           |  |       |                         |      |        |  |  |  |  |  |  |
|  | Mobile number                   |           |  |       |                         |      |        |  |  |  |  |  |  |
|  | Email address                   |           |  |       |                         |      |        |  |  |  |  |  |  |
| Next of Kin<br>details                           | Name and Surname of Next of Kin |           |  |       |                         |      |        |  |  |  |  |  |  |
|  | Relationship to the applicant   |           |  |       |                         |      |        |  |  |  |  |  |  |
|  | Home telephone (dialing code)   |           |  |       |                         |      |        |  |  |  |  |  |  |
|  | Mobile number                   |           |  |       |                         |      |        |  |  |  |  |  |  |
|  | Email address                   |           |  |       |                         |      |        |  |  |  |  |  |  |

### 3. Educational qualifications

|   |                        |           |                            |
|---|------------------------|-----------|----------------------------|
| Details of 3/4-year diploma / degree that you are about to complete / or have completed                             |                        |           |                            |
| Institution   |                        |           |                            |
| List of major subjects  |                        |           |                            |
|   |                        |           |                            |
|   |                        |           |                            |
| Did you complete any previous internship programmes or any workplace exposure related to your studies (please tick) | <b>Yes</b>             | <b>No</b> | <b>If yes, indicate:</b>   |
|   |                        |           | <b>Duration in months:</b> |
|   |                        |           | <b>Where:</b>              |
|   |                        |           | <b>Year:</b>               |
| Where did you hear about the MTFza Academy?   | Promo on TV            |           |                            |
|   | Website                |           |                            |
|   | University / College   |           |                            |
|   | Social Media           |           |                            |
|   | Word of Mouth          |           |                            |
|   | Other – please specify |           |                            |

### 4. Declaration (please tick where appropriate)

|   |  |  |
|---|--|--|
| I agree to the company conducting the relevant background or reference checks as part of the selection process. |  |  |
| I agree to go through psychometric testing as part of the selection process.                                    |  |  |
| The Internship is in Gauteng. I am willing to relocate to Johannesburg for the duration of the Internship.      |  |  |
| I understand that there is no guarantee of employment at the end of the Internship                              |  |  |

I hereby declare that all information provided in this application is true and correct. I understand that any false information will automatically disqualify me from being part of the internship. I further declare that I have read the applicable terms and conditions available at [www.mnetcorporate.co.za](http://www.mnetcorporate.co.za) and I agree to be bound by them.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_