



PERSONAL PARTICULARS OF EMPLOYEE

Complete this form if you are a first-time employee of the University

Title (Prof/Dr/Mr/Ms etc.):		Gender:	Male		Female	
Passport no:		Expiry date:				
Work permit no:		Expiry date:				
Residence permit: <i>(please attach a copy of work / residence permit)</i>	Yes	Nationality:				
	No	ID number: <i>(please attach copy)</i>				
Surname:						
First name(s):						
Maiden name:						
Postal address:						
				Post code:		
Street address:						
				Post code:		
Email address:						
Correspondence language preference: <i>(tick box)</i>		English		Afrikaans		
Are you disabled? <i>(See note):</i>	Yes	Do you hold a position at any institution other than Stellenbosch University?			Yes	
	No				No	
Race: <i>(Information required by statute for statistical purposes)</i>	Indian			African		
	Coloured			White		
Marital status:	Married		Single			
If you have a tax reference number, provide it here:						

DECLARATION

I declare that the information furnished in this form is true and correct.

Date

Signature of employee

Department or division where employed

NOTE: "People with disabilities" refers to people who have a long-term or recurring physical or mental impairment that substantially limits their prospects of entry into, or advancement in, employment.