



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.