



DX TRADING {pty} LTD

Schmidt Building, Shop No 11, Kock, independence Ave, Windhoek, Independence Ave, , Windhoek,
Namibia, 10005
(081) 691-8529
admin@dxconnect.shop

Employment / Job Application

PERSONAL INFORMATION

FULL NAME: _____ DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

E-MAIL: _____ PHONE: _____

SOCIAL SECURITY NUMBER (SSN): _____ - _____ - _____

DATE AVAILABLE: _____

WORKING DAY: MON TO SATURDAY

WORKING HOURS 08:30 TO 17:30

POSITION APPLIED FOR: _____



EMPLOYMENT ELIGIBILITY

ARE YOU A NAMIBIAN CITIZEN? YES ☐ NO ☐

HAVE YOU EVER WORKED FOR THIS EMPLOYER? YES ☐ NO ☐

*IF YES, WRITE THE START AND END DATES: _____

HAVE YOU EVER BEEN CONVICTED ? YES ☐ NO ☐

*IF YES, PLEASE STATE CONVICTION: _____

EDUCATION

HIGH SCHOOL: _____ CITY / STATE: _____

START DATE: _____ END DATE: _____

GRADUATE? YES ☐ NO ☐

TERTIARY EDUCATION: _____ CITY / STATE: _____

START DATE: _____ END DATE: _____

GRADUATE? YES ☐ NO ☐



DEGREE: _____

OTHER: _____ CITY / STATE: _____

START DATE: _____ END DATE: _____

DEGREE: _____

OTHER: _____ CITY / STATE: _____

START DATE: _____ END DATE: _____

EMPLOYMENT HISTORY

EMPLOYER #1: _____

E-MAIL: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

JOB TITLE: _____ RESPONSIBILITIES: _____

START DATE: _____ END DATE: _____



REASON FOR LEAVING: _____

EMPLOYER #2: _____

E-MAIL: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

JOB TITLE: _____ RESPONSIBILITIES: _____

START DATE: _____ END DATE: _____

REASON FOR LEAVING: _____

REFERENCES

REFERENCE #1: _____ **RELATIONSHIP:** _____

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

REFERENCE #2: _____ **RELATIONSHIP:** _____



COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

BACKGROUND CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? YES ☐ NO ☐

DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _____ **DATE:** _____

PRINT NAME _____