





<b>(D) QUALIFICATION INFORMATION</b>	To be completed by Candidate – PLEASE PRINT
--------------------------------------	---

	(1)	(2)	(3)	(4)
Qualification:				
Institution/School:				
Province / Address:				
Date Obtained:				
Student No:				
Certificate No:				
Exam No:				

<b>(E) INDEMNITY DECLARATION</b>	To be completed by Candidate – SIGN and DATE
----------------------------------	--

I hereby authorize the Company's duly authorized verification agent, **DOTS RECRUIT**, to forward any personal information as well as any information that I have provided in support of my application to verification information suppliers acting on behalf of **DOTS RECRUIT** (including but not limited to the South African Police Services/Ideco, the Government of the RSA, and any educational, training, credit bureau and fraud prevention organizations) for the purpose of verifying my personal credentials and records. Authorized credential verification types include, but are not limited to, educational qualifications, professional membership, employment history, employment references, consumer credit, criminal record, drivers' license and fraud prevention checks. I authorize **DOTS RECRUIT's** verification information suppliers to furnish information regarding my credentials, whether claimed or not, to **DOTS RECRUIT and the Company**. I unconditionally indemnify **DOTS RECRUIT** and its verification information suppliers against any liability that may result from furnishing information in this regard. I understand that it is a condition of **DOTS RECRUIT's** verification information suppliers that this information is furnished by them solely for the purposes of my proposed / continuation of employment via the offices of the **Company** and that any information that is furnished to **the Company and DOTS RECRUIT** will be disclosed to me before a decision is made on my continued employment or application for employment. Furthermore, I authorize **DOTS RECRUIT** to host my fingerprints and, upon request and with my consent, to release criminal results to other organisations.

.....

..... / ..... / .....

**CANDIDATE SIGNATURE** D D      M M      C C Y Y

As the enquiring Agent of the Company, and in the case that this form instructs DOTS RECRUIT to provide consumer credit information, I hereby state that I understand the provisions of the National Credit Act (34 of 2005), section 70(2)(g), and the Regulations made in terms of the Act, section 18(4) and (5).

.....

..... / ..... / .....

**AGENT SIGNATURE** D D      M M      C C Y Y

All signatories to this document agree that DOTS RECRUIT will NOT be held liable for the content, factual correctness or accuracy of any Supplier Data supplied to DOTS RECRUIT for the Company by DOTS RECRUIT's suppliers. The Company and the Candidate hereby indemnifies and holds DOTS RECRUIT harmless against any loss arising from neglect or damage in procuring, communicating or failing to communicate information to the Company