LPW29

## LIMPOPO PROVINCE DEPARTMENT OF PUBLIC WORKS

## APPLICATION FORM: REMUNERATIVE WORK OUTSIDE EMPLOYMENT

1.	. Full Names and identity number		
2.	Persal number		
3.	Program and designation		
4.	Duties performed at work (specify)		
5.	Nature of remunerative work (business), please specify		
6.	6. Expected number of hours to be performed per week		
7.	Specify time when remunerative work will be performed		
8.	Applicant's role in remunerative work outside employment (briefly explain)		
Signature of Applicant		Date	
Comments by employee's Senior Manager			
Sig	Signature of Senior Manager Date		
Recommended / Not Recommended			
		D. (1)	
Sig	gnature of Head of Department	Date	
Approved / Disapproved			
ME	EMBER OF EXECUTIVE COUNCIL	DATE	