



EDUCATOR INTERNSHIP APPLICATION FORM: 2027

FULL NAME OF APPLICANT: _____

RESIDENTIAL ADDRESS: _____

NATIONALITY: _____

IDENTITY NUMBER: _____

GENDER: _____

CELL PHONE NUMBER: _____

EMAIL ADDRESS: _____

SCHOOL ATTENDED: _____

CURRENT UNIVERSITY: _____

Photograph
Of
Applicant

WHAT WOULD BE YOUR TWO TEACHING SUBJECTS?

1. _____
2. _____

Please email this form, along with all applicable documentation listed below, to: intern@cghs.co.za

NO APPLICATION WILL BE CONSIDERED WITHOUT ALL OF THIS INFORMATION

		YES	NO
1.	Curriculum Vitae including contact details of at least two referees		
2.	One page letter of motivation as to why you want to become a teacher and why you should be given this opportunity		
3.	A certified copy of your ID document		
4.	A certified copy of your Grade Twelve NSC certificate.		
5.	For University students/graduates: a certified copy of your senior certificate and transcripts of your complete academic record to date as well as a clearance certificate to prove your fees are up to date.		

This form and all documents must reach us by no later than the closing date, which is **20 September 2026**.