



SOUTH AFRICAN HAJJ AND UMRAH COUNCIL (SAHUC)

HAJJ MISSION APPLICATION FORM 1440 H / 2019

Application form and supporting documents must submitted to sahucsg@sahuc.org.za by 01 February 2019 (6pm)

<i>All spelling and detail must be the same as in passport</i>		Age - on 14th June 2019	
ZA-ID Number		Indicate Your Choice Application - Tick Box <input checked="" type="checkbox"/>	
ZA-Passport Number	Expiry Date <input type="checkbox"/>	1) HAJ Mission Field Worker	
Surname / Last Name		2) HAJ Mission Medical Doctor	
First Name & Middle		3) HAJ Mission Medical Nurse	
Prefix / Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Dr. <input type="checkbox"/> Other -	Gender - Tick Box <input checked="" type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Physical Address		Dates of availability - Tick Box <input checked="" type="checkbox"/>	
Town			
Province			
Postal Address			
	Postal CODE:		
Marital Status			
No Of Dependents on your income		No returns will be allowed before 21 August 2019	

Language - Tick Box <input checked="" type="checkbox"/>	Speak Fluent	Read and Write	Contact Numbers - Insert Code+number	
Arabic			Business	
English			Home	
Afrikaans			Mobile	
Other			Fax	
Briefly List Education and Qualifications Achieved			email	
1)			Emergency	
2)			Emergency Contact	
Drivers Licence International	Yes <input type="checkbox"/> No <input type="checkbox"/>		email	

Present Employment		Work Duties	
Telephone and Contact			
Previous Employment		Work Duties	
Telephone and Contact			
Previous Employment		Work Duties	
Telephone and Contact			
Voluntary Duties		Work Duties	
Telephone and Contact			
Voluntary Duties		Work Duties	
Telephone and Contact			
Have you been on a previous HAJJ mission - please fill all details		How Many Times?	
Year	Mission Head <input type="checkbox"/>	Duty Performed <input type="checkbox"/>	
Year	Mission Head <input type="checkbox"/>	Duty Performed <input type="checkbox"/>	
Year	Mission Head <input type="checkbox"/>	Duty Performed <input type="checkbox"/>	
Year	Mission Head <input type="checkbox"/>	Duty Performed <input type="checkbox"/>	
Year	Mission Head <input type="checkbox"/>	Duty Performed <input type="checkbox"/>	

State Of Health and Physical Ability - indicate clearly		When last have you made HAJ	
1)		Passport Photograph Attached	
2)		Size Of Jacket and T-Shirt	

Brief motivation for your application - a full C.V. must be attached

Do you have any family members that are performing Hajj this year (1440 H / 2019) If YES, please state relationship.

I hereby agree that all the above is true and correct, and that I hold no prejudice in any selection to serve the SAHUC HAJJ mission.
I agree to abide by the rules, regulations and protocol governed by SAHUC, and the Hajj Ministry of The Kingdom Of Saudia Arabia.

Signed At	Date	Signature	Office Use - Rec By
			Date Received
			Date of Interview