



# PASA

Pan-African Security Association

## **Application for Individual membership**

Mail to the completed document to: [chris@pasa-africa.org](mailto:chris@pasa-africa.org)

Or Fax the completed document to: +27 86 689 7806

**PERSONAL DETAILS**

First Names:

Surname:

Residential Address:

Date of Birth:

Nationality:

Passport Number:

Expiry Date:

Father's Names:

Mother's Names:

Contact Mobile:

Contact Landline:

Contact Other:

E Mail Address:

Closest Int. Airport:

Drivers Lic. Type:

Drivers Lic. Number:

ID Number:

Defense Force Nr:

Police Force Nr:

Weight:

Height:

NOK (Next of Kin) Name:

NOK Contact Nr:

NOK Relation:

**EDUCATIONAL EXPERIENCE**

High School Attended:

Highest Grade Passed:

Subjects Passed:

Tertiary Education:

(State in broad)



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Other Relevant Information:

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Contactable References:

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## Employment History

**Instructions:** Please print and list every position that you have held for the past ten years starting with your most recent position.

(Account for periods of unemployment.)

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**Employment Background:** Present or most recent employer:

Employer: \_\_\_\_\_

Address \_\_\_\_\_  
Street

Name and Title of Supervisor: \_\_\_\_\_

Your current or last position and duties \_\_\_\_\_  
\_\_\_\_\_

Your starting position and Duties: \_\_\_\_\_  
\_\_\_\_\_

Other compensation (give detail on current commissions, incentives, bonuses etc.): \_\_\_\_\_  
\_\_\_\_\_

May we contact your present employer for a reference:

Yes  No

Phone: \_\_\_\_\_

Employed From (MM/YY): \_\_\_\_ / \_\_\_\_

Employed To (MM/YY): \_\_\_\_ / \_\_\_\_

Total Months: \_\_\_\_\_

Starting Base Pay: \_\_\_\_\_

Ending Base Pay:: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

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**Employment Background:**

Employer: \_\_\_\_\_

Address \_\_\_\_\_  
Street

Name and Title of Supervisor: \_\_\_\_\_

Your last position and duties \_\_\_\_\_  
\_\_\_\_\_

Your starting position and Duties: \_\_\_\_\_  
\_\_\_\_\_

Other compensation (give details): \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Employed From (MM/YY): \_\_\_\_ / \_\_\_\_

Employed To (MM/YY): \_\_\_\_ / \_\_\_\_

Total Months: \_\_\_\_\_

Starting Base Pay: \_\_\_\_\_

Ending Base Pay:: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

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**Employment Background**

Employer: \_\_\_\_\_

Address \_\_\_\_\_  
Street

Name and Title of Supervisor: \_\_\_\_\_

Your last position and duties \_\_\_\_\_  
\_\_\_\_\_

Your starting position and Duties: \_\_\_\_\_  
\_\_\_\_\_

Other compensation (give details): \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Employed From (MM/YY): \_\_\_\_ / \_\_\_\_

Employed To (MM/YY): \_\_\_\_ / \_\_\_\_

Total Months: \_\_\_\_\_

Starting Base Pay: \_\_\_\_\_

Ending Base Pay:: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

**Employment Background:**

Employer: \_\_\_\_\_  
Address \_\_\_\_\_  
Street \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_  
Your current or last position and duties \_\_\_\_\_  
\_\_\_\_\_  
Your starting position and Duties: \_\_\_\_\_  
\_\_\_\_\_  
Other compensation (give detail on current commissions, incentives, bonuses etc.): \_\_\_\_\_  
\_\_\_\_\_

May we contact your present employer for a reference:

Yes  No

Phone: \_\_\_\_\_  
Employed From (MM/YY): \_\_\_\_ / \_\_\_\_  
Employed To (MM/YY): \_\_\_\_ / \_\_\_\_  
Total Months: \_\_\_\_\_  
Starting Base Pay: \_\_\_\_\_  
Ending Base Pay:: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

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**Employment Background:**

Employer: \_\_\_\_\_  
Address \_\_\_\_\_  
Street \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_  
Your last position and duties \_\_\_\_\_  
\_\_\_\_\_  
Your starting position and Duties: \_\_\_\_\_  
\_\_\_\_\_  
Other compensation (give details): \_\_\_\_\_

Phone: \_\_\_\_\_  
Employed From (MM/YY): \_\_\_\_ / \_\_\_\_  
Employed To (MM/YY): \_\_\_\_ / \_\_\_\_  
Total Months: \_\_\_\_\_  
Starting Base Pay: \_\_\_\_\_  
Ending Base Pay:: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

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**Employment Background:**

Employer: \_\_\_\_\_  
Address \_\_\_\_\_  
Street \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_  
Your last position and duties \_\_\_\_\_  
\_\_\_\_\_  
Your starting position and Duties: \_\_\_\_\_  
\_\_\_\_\_  
Other compensation (give details): \_\_\_\_\_

Phone: \_\_\_\_\_  
Employed From (MM/YY): \_\_\_\_ / \_\_\_\_  
Employed To (MM/YY): \_\_\_\_ / \_\_\_\_  
Total Months: \_\_\_\_\_  
Starting Base Pay: \_\_\_\_\_  
Ending Base Pay:: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

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**Employment Background:**

Employer: \_\_\_\_\_  
Address \_\_\_\_\_  
Street \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_  
Your current or last position and duties \_\_\_\_\_

May we contact your present employer for a reference:

Yes  No

Phone: \_\_\_\_\_  
Employed From (MM/YY): \_\_\_\_ / \_\_\_\_  
Employed To (MM/YY): \_\_\_\_ / \_\_\_\_

Your starting position and Duties: _____	Total Months: _____
_____	Starting Base Pay: _____
Other compensation (give detail on current commissions, incentives, bonuses etc.): _____	Ending Base Pay: _____
_____	Reason for Leaving: _____
_____	_____

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**Employment Background:**

Employer: _____	Phone: _____
Address _____	Employed From (MM/YY): ____ / ____
Street	
Name and Title of Supervisor: _____	Employed To (MM/YY): ____ / ____
Your last position and duties _____	Total Months: _____
_____	Starting Base Pay: _____
Your starting position and Duties: _____	Ending Base Pay: _____
_____	Reason for Leaving: _____
Other compensation (give details): _____	_____

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**Employment Background:**

Employer: _____	Phone: _____
Address _____	Employed From (MM/YY): ____ / ____
Street	
Name and Title of Supervisor: _____	Employed To (MM/YY): ____ / ____
Your last position and duties _____	Total Months: _____
_____	Starting Base Pay: _____
Your starting position and Duties: _____	Ending Base Pay: _____
_____	Reason for Leaving: _____
Other compensation (give details): _____	_____

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**References:** List individuals who can attest to your professional abilities/work accomplishments. (Do not include individuals listed in *Employment Background* section.)

Name:	Address:	Phone:	Reference's Position or Relationship to You:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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**Security Information**

Do you presently hold a security clearance?  No  Yes If yes, state level: \_\_\_\_\_  
Have you ever held a security clearance?  No  Yes If yes, state level and dates held: \_\_\_\_\_

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Have you ever been denied a security clearance or had one revoked or suspended?  No  Yes If yes, explain: \_\_\_\_\_

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**Certifications**

I understand and agree that this application is not a contract of employment.  
I agree that the security service / police clearance document / certificate, will form part of my certification application.  
I agree that my information contained in this application may be made available to a security company to form a part of their vetting process when employment is considered.  
I agree that my information may be made available in order to compile an International list of accredited persons working in the private security environment to promote transparency.  
I accept that membership may be declined and that PASA cannot be held responsible for any omissions or information which is not contained in the application form.  
I agree that the results of my police clearance application may be requested by a representative of PASA and disclosed to a third party.  
Further, should I become an employee of a Private Security Company, notwithstanding the Company rules and regulations, I will adhere to the Pan African Security Association's Code of Ethics and Standards of Conduct, will report all suspected violations of law related thereto, and will conduct business in a strictly ethical and legal manner.  
I agree to abide by the International Rules and Regulations for Private security companies, currently under discussion, better known as the "Swiss Initiative" which will form part of the PASA rules and regulations which, may be adapted and changed from time to time.  
I also certify that the information furnished in this application and any supporting documents is true and complete to the best of my knowledge and belief and I understand that any misrepresentation or omission of material fact on this or any record submitted pertinent to membership of the Pan African Association will constitute grounds for immediate cancellation of membership.  
I agree to submit a current Police clearance certificate attached to the application form or alternatively go to Quemic either in Pretoria or Capetown offices to have fingerprints scanned for the clearance certificate required. We have negotiated a fee of R80.00 for the service. (see the office addresses below)  
I certify that Pan African Security Association retains the right to decline membership and retain the right not to disclose any reasons.  
I agree to pay the yearly application fee directly or via the Company into the PASA bank account and fax a copy of the deposit to +27 86 689 7806 or send via e-mail to [chris@pasa-africa.org](mailto:chris@pasa-africa.org)

Bank: Standard Bank  
Bank account name: Pan African Security Association  
Account Type: Current account  
Account number: 083312242  
Branch Code: 050311  
Swift Code: SBZAZAJJ

(in the event of Company group applications, mail the list of names to PASA and confirm amount transferred.) USD 50.00, per application, valid for 12 months.

I certify that I have read, understand and will adhere to the aforementioned statements.

Signature of Applicant: \_\_\_\_\_ Name of Applicant \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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**FOR OFFICE USE ONLY**

**Approved/Declined .....Certificate number..... valid for 12months after approval.**

**Date.....**

**Name.....**

**Reason if declined .....**

If you do not have a valid, in date, SAPS clearance, please contact the below company who will take care of the process.

**Fingerprinting and SAPS clearance.**

Quemic contact details for finger printing and SAPS clearance. Cost R80.00

Ref will be PASA application.

**CAPETOWN OFFICE**

270 Voortrekker Rd,  
PAROW, 7500  
Western Cape  
South Africa

+27 21 930 2672 tel  
+27 21 930 2673 fax

**PRETORIA OFFICE**

12 Baobab Nook,  
Swarikops Ext 4  
CENTURION, 0157  
Gauteng  
South Africa

+27 12 663 3366 tel  
+27 12 663 8978 fax

