

COURIERS X2 GLYNNWOOD, BENONI

WE MAKE PATIENT CARE A PRIORITY. IF YOU DO, JOIN OUR TEAM TODAY!

PathCare is a partnership of pathologists in private practice across South Africa that has been assisting doctors and healthcare professionals determine and confirm diagnoses since 1923. We are registered with the HPCSA (Health Professions Council of South Africa) and all our laboratories are SANAS accredited.

Opportunities exist for two Couriers to join the team at our Glynnwood Depot in Les Marais, Benoni. We are seeking individuals with high levels of ethics and integrity who display a proven track record of consistently aligning with the PathCare values.

Key Competency Requirements and Experience

- Grade 12 (Matric)
- Must have a valid driver's license for both codes A and B.
- Computer literate
- 2 years' courier delivery experience, including both motorcycle and vehicle experience
- Courier experience in the medical/pathology field is advantageous
- Effective communication and interpersonal skills
- Display initiative
- Ability to work under pressure, independently as well as in a team

- A positive attitude & flexible work-style
- Customer-focused with attention to detail
- Adaptability
- Must be fluent in English with an understanding of Afrikaans
- Must be prepared to work shifts, weekends & public holidays
- Must have an acceptable track record/performance record with regard to the technical and behavioural competencies required to perform in this position

CLOSING DATE: Tuesday, 3rd June 2025

Your contribution to the company will be rewarded with a market-related remuneration package which includes a retirement fund contribution and risk benefits (Group Life and Disability cover), annual bonus, competitive maternity benefits, health care allowance, discounted pathology tests, payment of HPCSA/SANC annual registration fees and developmental opportunities at the PathCare Training Academy.

Applicants who meet the criteria and are interested in joining our dynamic team are required to complete the attached application form and submit this together with a CV to <u>emmanuel.makopo@pathcare.net</u>

Please note: by applying for this position, your application will be subject to verification checks of your driver's license, Identity Document, qualifications/proof of registration, credit and criminal checks if required. Candidates must be willing to participate in a rigorous evaluation process.

PathCare is committed to the pursuit of excellence and diversity in achieving our equity targets and the organisation's approved Employment Equity plan will be considered as part of the talent acquisition process. All qualified candidates including people with disabilities are encouraged to apply.





Surname					Position Applied For			
First Names					Location Of Position			
Title (e.g. Mr, Dr)								
Nickname					SCHO	SCHOOLING RECORD		
Residential Address					Highest Grade Passed			
PO Box/Private Bag/Work					Year Obtained			
addresses are not allowed	Postal Code				Name Of School /			
Phone No Home					Institution			
- Work	()							
- Cell					TERTIARY QUALIFICATIONS			
Private Email Address					Degree/Diploma	Institution Year		
Postal Address						incutation		
(if different to residential)					-			
	Postal Code				-			
Identity Number			1 05101 0000					
Passport Number								
Tax Number						ST EMPLOYMENT REC	ORD	
Are you registered with	Yes Do you have employment Yes				Company Name		JOND	
SARS as a taxpayer	No	in addition to		No	Position Held			
Marital Status (for SARS)	Single	Married	Community	In	Period Employed	to		
Warta Status (for SARS)	olligic	Martieu	Property	Out		iu		
Next Of Kin Full Names					Final Salary			
Relation to you (eg. wife)					Reason For Leaving			
Address					May we contact them?	Yes N	0	
	Postal Code				Manager Name			
Two Contact Numbers					Phone Number	()		
Employment Equity	Gender Male		Female		PREVIOUS EMPLOYMENT RECORD			
Required for statistical	Race	African	Colou	red	1. Company Name			
purposes		White	Indian		Position Held			
Mark relevant with X	Disability	isability No Yes			Period Employed	to		
Nature Of Disability:					Reason Left			
					Manager's Name			
Professional Registration		HPCSA	Nursing	q	Phone Number	()		
For Current Year (please mark with X)		Other	None					
Registration Number					2. Company Name			
Are you paid up for year?	No	Yes	Please att	ach receipt	Position Held			
					Period Employed	to		
Have you had prior	No		Yes		Reason Left			
PathCare	If yes, state Job Title				Manager's Name			
Employment?	If yes, state Location				Phone Number	()		
and/or friends) either with	nin PathCar	e or with externa	l service or prod	duct providers? If	rding information, products/se yes, please provide additional atements could result in the termination of r	details: ny contract. I hereby authorise F	PathCare to carry	
out a credit and criminal record check hereby authorise and give consent to for the purposes of performing the ne	the Company a cessary backgr	ement for the position as and/or its duly authorise ound and credit checks	s well contact the preved verification agent to as well as confirming	vious employers and refe process the personal in employment history. I a	erences. I have indicated on this form or ot formation provided herein in terms of the F authorise the Company to further process ti hould your application not be successful w	her related documents such as Protection of Personal Information he personal information provide	my CV, etc. I on Act ("POPIA") d herein should it	

Signature Of Applicant