**Bursary Application Form for 2020/21**

This application form is to be used by Public and Private HET / TVET Institutions seeking funding from W&RSETA for their students.

1. **HET / TVET Institution details:**

|  |  |
| --- | --- |
| **Name of the University / TVET College / Institution** |  |
| **CHE / DHET Registration number** |  |
| **Name of the Authorized person that will sign the MOU with W&RSETA** |  |
| **Official Designation** |  |
| **Physical Address** |  |
| **Postal Address** |  |
| **Name of the Contact Person for administration of the MOA** |  |
| **Contact Person Telephone Number** |  |
| **Primary Email Address** |  |
| **Contact Number** |  |

1. **Student Details**

|  |  |  |
| --- | --- | --- |
| **Student Status** | **Number of Students** | **Total Amount** |
| First year students (new bursars) |  |  |
| W&RSETA funded Students continuing with their studies (yr 2 & 3) |  |  |

* Please attach the Costing Schedule for all students that meet the advertised criteria, clearly indicating the cost per item to be funded.
* The above information will form part of the MOA between the Institution and W&RSETA.
* W&RSETA reserves the right not to make all / any allocations as per the advertised criteria.

I/We hereby confirm that:

* The programmes offered at our Institution that relate to the “Hard to fill vacancies” as specified on the advert, are registered and accredited by the relevant Quality Council (CHE / Umalusi / QCTO / Other).
* We will administer the bursary and allowances allocated for the duration of the programme.
* We will submit the necessary supporting documents to the SETA as per DHET validation requirements upon conclusion of the MOU:
  + Bursary Agreement signed by student
  + Certified copy of ID
  + Proof of registration / Acceptance with institution
* The Institution will register the learners on the SETA MIS system
* The Institution will provide academic results for continuous bursars previously funded by W&RSETA
* We will enter into a MOU with W&RSETA for the duration of studies of the above learners.
* Bursars that will form a part of this application must seek approval from W&RSETA prior to accepting any other form bursary.

1. **Authorization of Application by Institution**

I…………………………………………………………… the undersigned, hereby confirm that the above application details are correct and that this application is made on behalf of the institution to apply for bursary funding from W&RSETA.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name & Surname** |  | | |
| **Position** |  | | |
| **Signature** |  | **Date** |  |

*The Closing date for this application will be 31 August 2020.*