



APPLICATIONS FOR BURSARY

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|------------------------|--|
| SURNAME | |
| FULL NAMES | |
| STUDENT NUMBER | |
| ID NUMBER | |
| RESIDENTIAL ADDRESS | |
| TELEPHONE NUMBER | |
| NAME OF DEGREE/DIPLOMA | |

IMPORTANT

1. Please PRINT when completing the form
2. Mark appropriate blocks with an "X"
3. Attach copy of Matric Certificate and Highest Qualification/Statement of Results/Academic Record,
4. Acceptance letter from the Public Higher Education Institution
5. Attach copy of ID book
6. Attach parent's proof of income/salary of both parents or guardian,

APPLICATION FOR BURSARY

A. PERSONAL PARTICULARS

| | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------|---|------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------------------|--|
| SURNAME | | TITLE | | | | | | | | | | | | | | | | | | | | | |
| FIRST NAMES | | | | | | | | | | | | | | | | | | | | | | | |
| IDENTITY NO. | <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td><td style="width: 5%;"></td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | OFFICIAL LANGUAGE | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| HOME ADDRESS | | | | | | | | | | | | | | | | | | | | | | | |
| GENDER | | STUDENT NO. | | | | | | | | | | | | | | | | | | | | | |
| PERMANENT POSTAL ADDRESS | | TELEPHONE NUMBER | | | | | | | | | | | | | | | | | | | | | |
| | | DIALING CODE | | | | | | | | | | | | | | | | | | | | | |
| | | FAX NUMBER | | | | | | | | | | | | | | | | | | | | | |
| | CODE | DIALING CODE | | | | | | | | | | | | | | | | | | | | | |

B. ENVISAGED STUDY

| | |
|---|---|
| NAME OF DEGREE/DIPLOMA e.g. BA or BSc etc | |
| MAJOR SUBJECTS ONLY | 1. 2. 3. |
| AUXILIARY SUBJECTS | 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. |
| | |

| | |
|---|-------|
| AT WHICH UNIVERSITY/INSTITUTION ARE YOU/DO YOU INTEND TO STUDY? | |
| MINIMUM PRESCRIBED PERIOD OF COURSE | |
| LEVEL OF STUDY | |

C. EDUCATIONAL QUALIFICATIONS

| | |
|--|--|
| STATE HIGHEST STANDARD ONLY | YEAR : |
| DEGREE/COURSES ALREADY OBTAINED/PASSED | |
| ARE YOU STUDYING AT PRESENT | |
| SUBJECTS (PRESENT YEAR OF STUDY) | |
| NORMAL DURATION OF COURSE | YEARS: REMAINING STUDY PERIOD (YEARS) : |

NB: Attach a complete official study record showing marks/symbols/percentages obtained in all examinations (including the matriculation examination) written as well as the half year results in respect of the present year of study.

D. GENERAL

| | |
|---|--|
| ARE/WERE YOU IN POSSESSION OF A BURSARY/LOAN? | |
| IF YES, STATE SPONSOR | |
| PERIOD OF BURSAYR/LOAN | |

I realise that this is a bursary with a service obligation that I am applying for and I undertake to abide by the conditions pertaining to the granting thereof.

I declare that the above mentioned particulars are complete and correct.

.....
SIGNATURE OF APPLICANT

.....
DATE