

**APPLICANT'S NAME:** 

## **APPLICATION FOR A BURSARY**

PERSONAL INFORMATION				
SURNAME:	TITLE: (MR/MRS/MISS/OTHER)			
FIRST NAMES IN FULL:				
PREFERRED NAME:				
DATE OF BIRTH (dd/mm/yy):	IDENTITY NUMBER:			
PLACE OF BIRTH:	NATIONALITY:			
HOME LANGUAGE:				
CONTACT ADDRESS WHERE YOU	WILL BE STAYING DURING THE ACADEMIC YEAR:			
	CODE:			
YOUR HOME ADDRESS:				
1				
	CODE:			
YOUR CONTACT TELEPHONE NUM	BERS:			
YOUR CONTACT EMAIL ADDRESS:				
FULL NAMES OF PARENTS/LEGAL GUARDIAN (IF YOU ARE STILL A MINOR):				
ADDRESS OF PARENTS/LEGAL GU	ARDIAN:			
	CODE:			
CONTACT TELEPHONE NUMBERS	OF PARENTS/LEGAL GUARDIAN:			
HAVE YOU EVER BEEN CONVICTED	D OF A CRIMINAL OFFENCE?			
IF YES, PLEASE GIVE PARTICULAR	lS			
STATE OF HEALTH:				

## **CURRENT STUDENT DETAILS**

## **MID-TERM, MATRICULATION OR EQUIVALENT QUALIFICATION**

**CERTIFICATE OBTAINED:** 

**EXAMINATION WRITTEN IN:** 

SCHOOL:

TOWN/CITY:

PROVINCE: SCHOOL ACHIEVEMENTS **PERCENTAGES / SYMBOLS ATTAINED GRADE 12 RECORD (MATRIC) SPECIFY SUBJECTS** HG SYMBOL HG% SG SYMBOL SG% PERCENTAGES (FROM N5/N6) **TECHNICAL COLLEGE** N5 N6 70% AND ABOVE

## EDUCATIONAL QUALIFICATIONS

TERTIARY EDUCATION/CURRENT STUDIES						
PLEASE SELECT YOUR STUDY AREA OF	CHOICE	FROM	<b>I THE LIST</b>	BELOW BY MARKING		
WITH "x"						
BACHELOR OF ENGINEERING	BAC	BACHELOR OF SCIENCE – Computer Science				
BACHELOR OF SCIENCE IN ENGINEERING	N.D. COMPUTER ENGINEERING		EERING			
N.D. ELECTRICAL ENGINEERING (LC)	BACHELOR OF COMMERCE					
N.D. INFORMATION TECHNOLOGY	N.D	N.D. FINANCIAL INFO SYSTEMS				
N.D. ACCOUNTING						
INSTITUTION						
PRESENT YEAR OF STUDY:	UNIVERSITY		ſ	TECHNIKON		
FRESENT TEAR OF STUDT.	1ST		2ND	S1		
WHAT YEAR DO YOU PLAN TO COMMEN	CE/HAV	E YOL	J COMMEN	CED		
UNIVERSITY/TECHNIKON?						
ADDITIONAL INFORMATION						
ARE YOU CURRENTLY RECEIVING OR HAVE YOU RECEIVED ANOTHER BURSARY OR						
STUDY LOAN? IF YES, PLEASE STATE.						
1. NAME OF INSTITUTION THAT GRANTED BURSARY/ STUDY LOAN						
2. OBLIGATION/CONDITIONS						

DECLARATION					
I,IN MY CAPACITY AS APPLICANT/PARENT/GUARDIAN, DECLARE THAT THE ABOVE PARTICULARS ARE COMPLETE AND CORRECT					
SIGNATURE OF APPLICANT	DATE				
SIGNATURE OF PARENT/ GUARDIAN (IN CASE OF A MINOR)	DATE				
IMPORTANT: PLEASE ATTACH THE FOLLOWING DOCUMENTS:					
<ol> <li>COPY OF YOUR I.D. DOCUMENT</li> <li>A COMPLETE OFFICIAL STUDY RECORD OR ANNUAL RECORDS/ PERCENTAGES OBTAINED IN ANY EXAMINATIONS ALREADY WRITTEN. SHOULD IT NOT BE AN ORIGINAL, PLEASE ATTACH A CERTIFIED COPY. A COPY OF THE RELEVANT CONTRACT OF ANY OTHER FUNDING FOR YOUR</li> <li>EDUCATION</li> </ol>					
PLEASE NOTE SHOULD YOU NOT ATTACH YOUR OFFICIAL STUDY RECORDS OR ANNUAL RECORDS/ SYMBOLS/ PERCENTAGES OBTAINED FOR SUBJECTS/COURSES ALREADY WRITTEN THIS COULD DISQUALIFY YOUR APPLICATION					