Mining Qualifications Authority 7 Anerley Road Parktown, Johannesburg, 2193 Private Bag X118, Marshalltown, 2107 Tel: 011 547 2600 Email: info@mqa.org.za



MINING QUALIFICATIONS AUTHORITY 2022 EMPLOYED BURSARY APPLICATION FORM

Closing date: 30 September 2021

Please Note:

- This form must <u>ONLY</u> be completed by applicants who are <u>PRESENTLY</u> employed within the Mining and Mineral Sector.
- The Employed Bursary is not available for applicants on a structured Internship Programme or Work Experience (P1/P2) Programme. These programmes are not considered as employment for the purpose of this bursary.

GUIDELINES AND INSTRUCTIONS

1. APPLICATION FORM

- The Applications Form is an electronic <u>fillable PDF format</u> with drop-down menus for ease of completion. <u>DO NOT change the format of the form to a normal PDF or Word format</u>.
- Do not complete the form by hand.

NB: It is advised that you complete the form on a computer or laptop as not all smartphones or tablets have "PDF" functionalities to process fillable PDF forms.

2. SUPPORTING DOCUMENTS

- 1. Certified copy of a valid South African Identity Document.
- 2. Full Academic Record (if applicable).
- 3. Acceptance letter from a university or university of technology (if applicable).
- 4. Letter of consent from employer to engage MQA bursary scheme (on company letterhead and signed by immediate Supervisor (Very important).
- Only provide the documents requested above (where applicable)
- Certifications must not be older than 3 months.
- "Pictures" of documents taken with cell phone or tablet will be rejected all supporting documents must scanned in and properly named.

3. EMAIL OF APPLICATION FORM AND SUPPORTING DOCUMENTS

- E-mail your application form and supporting documents <u>ONLY</u> to: <u>Bursaries@mga.org.za</u>.
- Multiple e-mails from the same applicant will disqualify the application.

NB: Late and incomplete applications forms will be disqualified.

MQA/LP-SP/04/038

Revision: 02

Approved: COO

SECTION A - PERSONAL DETAILS OF APPLICANT

ID Number									
Surname									
Full Names									
Gender						Title			
Equity		Africa	an		Coloured	India	۱	Wh	ite
Disability		Yes		No	(Si	(State nature of disability hereunder)		ereunder)	
South African Citiz	en	Yes			No	If No, please state:			
Name of High Scho	ool at	tended				Year Matriculated			
	Stre	et:							
Home Address Su		ourb:							
(Province of origin)	City	ity/Town:							
	Pos	ostal Code:							
Home Province			Importo	unt for					
Local Municipality		NB: Important for reporting purpose, please select correct information							
District Municipality									
Location		Urban			F	Rural			
Contact Number						native mber			
Email address									

Name of Employer		
Employer SDL Number		
	Street:	
Employer Address	Area:	
	City/Town:	
	Postal Code:	
Name of Immediate Super	rvisor	
Contact telephone of Sup	pervisor	
Email address of Supervis	sor	

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SECTION B.2 - TERTIARY EDUCATION: 2022 ACADEMIC YEAR

Details of Institution and qualification you will studying in 2022						
Type of Institution						
Name of Institution						
Name of Qualification						
Qualification Type						
Academic Status in 2022						
Student Number, if you are alr	eady studying					
Are you currently on Internship	m	Yes		No		
Will you be completing your qu	alification during	2022?	Yes		No	

SECTION D: DECLARATION

By submitting this form and supporting documents, I declare that all the information provided is **TRUE AND CORRECT,** and I am aware that providing incorrect information and documents will result in the disqualification of my application. I also acknowledge that the awarding of a bursary is at the absolute sole discretion of the MQA, and the MQA reserves the right not to award me the bursary.

I further authorise the MQA to access, from the university, university of technology and my employer, any necessary relevant information/documents that has a bearing on this application, and continue to access information/documents should my bursary application be successful. I furthermore authorising the MQA to share my personal information with any institution/organisation/state department for reporting and research purposes.

Names and Surname		Date	
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