



EXTERNAL BURSARY APPLICATION FORM
DEPARTMENT OF LOCAL GOVERNMENT AND
TRADITIONAL AFFAIRS
(This form is for non-employees only)

Application Form Checklist:	Please Tick
Did you:	
Adhere to the closing date for bursary applications	
Attach a recent passport- size photo	
Attach a certified copy of your identification document	
Attach your progress report - Institution	
Attach a certified copy of your senior certificate – Grade 12	
Attach your proof of admission or provisional admission letter from the institution	
Attached a recent copy of your parents or guardian’s pay slip / proof of pension or grant / sworn affidavit of income	
Give concise answers and where applicable, mark with X	
Forward application to: The Manager: HRD Department of Local Government and Traditional Affairs Private Bag X0035 Bhisho 5605 <i>Please note: This application form is subject to approval and the signing of a Bursary Agreement</i>	

A. PARTICULARS OF APPLICANT

Title..... Surname.....
 First names.....

Female	Male
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Identity number

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Black Coloured Indian White Asian

B	C	I	W	A
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Do you have a disability? (This information will not be used to disadvantage you)

Yes	No
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Nationality.....

Marital status..... Home Language.....

Postal address

Residential address

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 (Code)

.....

 (Code)

Cell phone no.....

Tell no (H) Code.....
 (W) Code.....

Number.....
 Nuber.....

Contact number of relative: Code:..... Number.....

What relation is the relative of yours.....

Fax no Code Number.....

E- Mail.....

B. EDUCATIONAL QUALIFICATION

The information required must be furnished by all applicants.

Schooling

Highest standard passed

Name of school

Year obtained

(Attach certify copy of Grade 12 results)

University training

Field of Study

Name of University / Institution

Degree / Diploma, etc. obtained or enrolled

In which academic year of study are you at present?.....

In which year did you commence Tertiary studies?.....

Have you failed in any year of study? Y / N.....

If so, which year of study

Year(s) already passed: Please circle: 1st / 2nd / 3rd / 4th / 5th / 6th

(Attach certify copy of progress report and / or certify copy of qualification)

Other training

Name of institution

Course

Year(s) already passed. Please circle: 1st / 2nd / 3rd / 4th

(Attach certify copy of progress report and/ or certify copy of qualification)

C. DETAILS OF COURSE YOU ARE APPLYING FOR:

Indicate Degree / Diploma ect.

Field of study

Name of Institution

Please circle,
For which year do you intend to register: 1st / 2nd / 3rd / 4th / 5th / 6th

Duration of qualification (number of years)

Fees: Attach quotation for current academic year: R.....

Please indicate name of :

PROVINCE	CITY	TOWN

Please note: Bursaries for non employees as full time study applicants will cater for registration, examination, tuition, accommodation, meals and text books. The Department will not take over any study debt.

D. OTHER BURSARY OR SPONSORS

Do you presently study with a bursary?

Yes	No
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If yes, name of the bursary

Annual value of the bursary

Will you inform the Department of Local Government and Traditional Affairs if you receive another Bursary / Funding?

Yes	No
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Father's occupation

Contact Number.....

Mother's occupation

Contact Number.....

Guardian's occupation

Contact Number.....

(Attach a proof of income or a sworn affidavit)

Mark your father's monthly income group (R)

2 500	2 501- 5000	5000
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Mark your mother's monthly income (R)

2 500	2 501- 5000	5000
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Mark your guardian's monthly income (R)

2 500	2 501- 5000	5000
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How many other dependents are still at home?

No of dependents at tertiary institution?

No of dependents still at school?

Do you have or received study loan?

Yes	No
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If yes, name of the loan

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For what purpose?

.....

When did you get it?

.....

If you are not currently enrolled at an educational institution, please indicate what you are studying.

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E. PRIZES AND AWARDS RECEIVED

Name/ type of award	Name of sponsor	Amount / value

F. ACADEMIC REFERENCES

SURNAME & INITIALS	TITLE	RELATIONSHIP	ADDRESS	CONTACT No
1.				
2.				
3.				
4.				
5.				

G. DECLARATION

I certify that the information supplied in this application is truthful and correct, all documents are attached as requested and if I am awarded a bursary, I will abide by the regulation applicable as stated per the Bursary Agreement.

Signature of applicant:

Date:

If still a minor, signature of parent / guardian;

Date

Important notice: Submission of the Bursary Application Form does not mean that your application has been successful. You will be informed of the outcome in nearer future.

CONFIDENTIAL REPORT BY PRINCIPLE IN THE CASE OF STUDENTS (SCHOOL)

Name of Applicant (Student):

Performance of duties (give details with reference to various qualities):

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Conduct and class-room manners:

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Is applicant of sober habits?

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Does applicant show aptitude for further studies applied for?

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Additional remarks:

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PRINCIPAL

DATE

Name of school

Address

.....
..... (Code)

Contact number

REMARKS BY THE DEPARTMENTAL SKILLS AND DEVELOPMENT COMMITTEE: BHISHO

- The intended studies are considered as a scarce skill in the Department.
- Remarks (if any)

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RECOMMENDED / NOT RECOMMENDED

CHAIRPERSON:
DEPARTMENTAL SKILLS AND DEVELOPMENT COMMITTEE

DATE: