

APPLICATION FORM

N.B. This form must be completed in full by learners/ Students from needy deserving families. Only residents in Greater Middelburg and Phola (Ogies) can apply.

												_
Write clearly and use capital letters.												
1.PERSONAL DETAILS												
1.1 SURNAME:												
1.2 FULL NAMES:												
1.3 DATE OF BIRTH:	(Attach certifie	d cop	y of	birth	certi	ficate	e or l	D)				
1.4 RESIDENTIAL ADDRESS:												
				ODE				I		1		
1.5 POSTAL ADDRESS:												
					رر	DDE						
1.6 TELEPHONE/CELL NO:						JUL						Ī
1.0 TELEPHONE/CELL NO:												

1.7 PRESENT SCHOOL/INSTITUTION												
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1.8 PRESENT GRADE OR LEVEL OF STUDY												
1.9 SUBJECT STREAM												
		•	•	•	•	•			•			
2. (FUTURE) CAREER CHOICES												
2.1 FIRST CHOICE												
		1										
2.2 SECOND CHOICE												
2.3 THIRD CHOICE												
										•	•	
3. DECLARATION BY APPLICANT												
<u> </u>	Declare	e tha	the	abov	e info	rmat	tion f	urnis	shed			
above is true and correct												
SIGNATURE			,	DA ⁻	ΤΕ						u.	
N.B. Use a separate sheet for any motivation and attach	<u>it</u>											

4. DETAILS OF PARENTS / GUARDIANS

4.1. SURNAME:									
	I	I					ı		
4.2. FATHER'S NAME:									
4.3. MOTHER'S NAME:									
4.3. MOTHERS NAME.									
4.4. CHARDIAN'S NAME.									
4.4. GUARDIAN'S NAME:									
4.5.10.11.11.11.11.15.05.	<u> </u>	<u> </u>					I		
4.5 ID NUMBERS: MOTHERS	<u> </u>	<u> </u>							
FATHERS									
4.6. RELATIONSHIP INCASE OF GUARDIAN:									
4.7. NUMBER OF DEPANDANTS AT SCHOOL:									
	 ı	T							
4.7.1. NUMBER OF DEPANDANTS AT TERTIARY:									
4.8. CONTACT DETAILS/ CELL NO. OR TELEPHONE:									
4.6. CONTACT DETAILS/ CLLE NO. OR TELEPHONE.									
4.9 OCCUPATION (JOB)									
								I.	
4.10. POSTION AT WORK:									
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4.11. GROSS ANNUAL INCOME: R									

4.12. GROSS ANNUAL INCOME OF SPOUSE:	R												
		(Attach c	opies	of pa	ıyslip	s)							
4.13. ANY OTHER SOURCESOF INCOME:	R												
5. DECLARATION BY PARENT/GUARDIAN													
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above is true and correct

SIGNATURE		DATE
SIGNATORE	SCHOOL STA	
SUMMARISED SELECTION	N CRITERIA	
1. RESIDING WITHIN GRE	EATER MIDDELBURG AND PH	IOLA (OGIES) AREA.
2. FROM A NEEDY FAMIL	Y	
3. ACHIEVING 60% AND A	ABOVE / (LEVEL 5) IN KEY SU	BJECTS : PHYSICIANS/ MATHS ACCOUNTING/ENGINEERING LIFE SCIENCE
4. FOLLOWING SCIENCE,	ENGINEERING, COMMERCE,	, TECHNOLOGY AND LAW STREAM
5. EXEMPTION/ BACHELO	DR'S PASS IN GRADE 12.	
RECEIVE BURSARY LOANS		
Return completed applic	cation form to: THE ADMINI P.O. BOX	
	MIDDELBU	
	1050	

FOR OFFICE USE ONLY			
DATE RECEIVED:			
APPROVED/NOT APPR	OVED:		
CHAIRPERSON	SECRETARY	PATRON	
SIGNATURE:			
DATE:			

SCHEDULE OF PERSONAL DETAILS IN RESPECT OF LOAN AGREEMENT

1. PARTICULARS OF GRANTEE

SURNAME:		
MAIDEN SURNAME:		
FULL NAMES:		
ID NUMBER:		
DATE OF BIRTH:	GENDER:	
MARITIAL STATUS:		
POSTAL ADRESS:		
	CODE:	
PHYSICAL ADRESS:		
	CODE:	
FAX NUMBER:		
CELLPHONE:		
E-mail:		

2. PARTICULARS OF NEXT OF KIN (PARENT/ GUARDIAN/ SPOUSE) FULL NAMES AND SURNAME: ADDRESS: RELATIONSHIP: TELEPHONE (HOME) TELEPHONE (WORK)_____ FAX NUMBER: CELLPHONE: E-mail: **3.PARTICULARS OF TERTIARY INSTITUTION** NAME: COURSE OF STUDY: YEAR OF STUDY: STUDENT NUMBER: SIGNATURE: WITNESS NAMES: