

EXTERNAL BURSARY APPLICATION FORM

2020 ACADEMIC YEAR

CLOSING DATE FOR EXTERNAL BURSARY APPLICATIONS: FRIDAY 20 DECEMBER 2019

Instructions

- 1. Read carefully before completing and submitting this form.
- 2. Ensure that this form is completed in full.
- 3. Complete in BLOCK LETTERS.
- 4. Ensure that this form is duly signed.
- 5. Application forms with incomplete information will be disqualified.
- 6. No faxed application forms will be accepted.

Submitted to:

Capricorn District Municipality Registry (Head Office)
41 Biccard Street
POLOKWANE
0700

Compulsory Documentation:

Please note that failure to submit the required documents will result in your application being disqualified.)

- a) Fully completed CDM Bursary Application Form
- b) Proof of physical address (A letter from Traditional Authority Offices for those residing in the villages, Proof of residence from the Municipality for those residing in town / townships) (NB: statement of clothing accounts / retail accounts will not be accepted)
- c) Certified copy of ID (applicant)
- d) Certified copy of ID (parent/s or guardian)
- e) Certified copy of statement of results / Matric Certificate
- f) Certified copy of provisional admission / acceptance letter
- g) Proof of income for parent/s or guardian (payslip / 6 months bank statement)

Section A: Personal Details of Applicant

1.	Surname			
2.	Names			
3.	Date of Birth			
4.	ID Number			
5.	Gender			
6.	Race			
7.	Do you have disability	Yes	No	
		If yes. Describe the nature of disability:		f disability:
8.	Residential address			
9.	Postal Address			
10.	Contact number	Office:		Cellular:
44	For all publication			
11.	Email address			
12.	Grade 12 subjects	1.		
		2.		
		3.		
		4.		
		5.		
		6.		
		7.		
		8.		
13.	Do you currently have			
	a bursary? (If yes, provide details of the bursary)			

Section B: Personal Details of Parents

Mother

1.	Surname				
2.	Names				
3.	Date of Birth				
4.	ID Number				
5.	Occupation				
	Father				
	Father				
1.	Surname				
2.	Names				
3.	Date of Birth				
4.	ID Number				
5.	Occupation				
Total household income per annum: (NB: Please submit proof of income, i.e. payslip / 6 months bank statement)					
SIGNATURE (Mother): Date:					
SIGNATURE (Father):			Date:		

Legal Guardian

	Legai Oddi didii					
1.	Surname					
2.	Names					
3.	Date of Birth					
4.	ID Number					
5.	Occupation					
	tal household income p Please submit proof of income, i.e. p	Der annum: Dayslip / 6 months bank statement)				
SIG	GNATURE (Guardian): _		Date:			
SECTION C: MOTIVATION						
State circumstances that qualifies you to be awarded the bursary:						

Section D: EDUCATIONAL DETAILS OF APPLICANT

High School Education Name of qualification 2. Field of study 3. Name of institution 4. Duration of the course Intended study for 2018 academic year (Please mark with "X") National Diploma 1. Name of Degree qualification 2. Field of study Name of institution 3. 4. Duration of the course

NB: By signing this application form, as an applicant you declare that the information provided in this form including supporting documents are correct and it's a true reflection. And you understand that falsifying information could lead to your application being disqualified.

Date: _____

SIGNATURE (Applicant): _____