

Dear Applicant,

Thank you for showing an interest in our Bursary Program. In order for us to process your application, please fill in all the required information as accurately as possible, in a clear legible handwriting. Please take note of the following terms and conditions:

Eligibility Criteria:

- 1. Only South African born persons will be considered.
- Completed Grade 12.
- 3. Incomplete application forms may result in your application being rejected.
- Application forms and supporting documents must be submitted on or before the annual "Bursary Window Period" which is 21st October 2022 to 21st November 2022.
- 5. If you are a minor at the time of completing this application form, you must obtain written consent from your parents/guardian to complete this application form.
- 6. Preference will be given to applicants pursuing studies from scarce skills identified within our Industry.

Documents to be submitted together with application form:

- 1. Certified ID copy of applicant (not older than 3 months).
- 2. Grade 12 trial exam report and Grade 12 final report.
- For applicants currently enrolled at University, a certified copy of the final report for previous year.
- 4. Certified payslips of parents/guardian if they are employed.
- 5. Sworn Affidavit if parents / guardian are unemployed.
- 6. Certified copies of death certificates if parents are deceased.
- 7. Certified copy of divorce certificate is parents are divorced.
- 8. A copy of maintenance order if parents are divorced or separated.
- 9. A certified copy of the last two years financial statements if parents are self employed.
- 10. Proof of address.
- 11. Testimonial from School and a testimonial from current Lecturer (if currently studying).
- 12. Letter of Motivation (completed in your handwriting).



Section A: Personal Details	
Full Name of Learner	
Surname	
ID Number	
Date of Birth	
Contact Number	
Email	
Gender	
Equity	
Physical Address	
Province	Postal Code
Municipality	
D	
Postal Address (if different from	
physical address	
Municipality	
ivianicipality	
Province	Postal Code
FIOVINCE	Postal Code



Section B Part 1:	Details of Mother		
Full Name of Mother			
Surname			
ID Number			
Contact number			
Physical Address			
Province			
Municipality			
Marital Status	Single Married Divorced		
Employment Status	Employed Self Employed Unemployed Pensioner		
Occupation	Name of Employer		
Telephone Number			
Section B Part 2:	Details of Father		
Full Name of Father			
Surname			
ID Number			
Contact number			
Physical Address			
•			
Province			
Municipality			
Marital Status	Single Married Divorced		
Employment Status	Employed Pensioner Unemployed		
Occupation	Name of Employer		
Telephone Number			



Section B Part 3 : Details of Guardian				
Full Name of Father				
Surname				
ID Number				
Contact number				
Physical Address				
Province				
Municipality				
Marital Status	Single Ma	rried Divorced		
Employment Status	Employed Se	If Employed Pensio	ner Unemployed	
Occupation		Name of Employer		
Telephone Number				
Section C: Incom				
	d finances (to be comple	ted by parent or guardian)		
Breakdown of househol		ted by parent or guardian) Parent (Father)	Guardian	
	d finances (to be comple		Guardian	
Total Gross Income	d finances (to be comple		Guardian	
Breakdown of househol	d finances (to be comple		Guardian	
Total Gross Income	d finances (to be comple		Guardian	
Total Gross Income Food	d finances (to be comple		Guardian	
Total Gross Income Food Rent	d finances (to be comple		Guardian	
Total Gross Income Food Rent Transport	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas Furniture Accounts Clothing Accounts	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas Furniture Accounts	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas Furniture Accounts Clothing Accounts Total expenses	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas Furniture Accounts Clothing Accounts Total expenses Other Income	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas Furniture Accounts Clothing Accounts Total expenses Other Income Pension	d finances (to be comple		Guardian	
Food Rent Transport Electricity/ Gas Furniture Accounts Clothing Accounts Total expenses Other Income	d finances (to be comple		Guardian	



Section D: Details of Applicants Academic review			
Name of High school attended			
Highest Standard passed			
Year highest standard passed			
Breakdown of subjects and results	Breakdown of subjects and results		
Grade 12			
Subjects	Results (Passed)	Symbol Obtained	
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
Academic Achievements			



Section E: Details of studies			
Name of			
course/Degree/Diploma			
Name of Institution			
Please indicate year of			
study funding is applied			
for			
Year of study (Please tick I	oelow) Plea	ase attach copies of quotes f	or studies.
First year	R		
Second year	R		
Third year	R		
Forth year	R		
Semester 1	R		
Semester 2	R		
Subjects and Subject Code	1		
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
Breakdown of studies costs (per year or semester) PLEASE ATTACH QUOTES			ACH QUOTES
		Year	Semester
Registration fees			
Tuition (for the year or sen	nester)		
Text books			
Accommodation			
Transport			
PLE	ASE ATTAC	CH QUOTES TO THE ABOVE B	REAKDOWN
Comments			



Section F: Motivational Essay Please describe your upbringing, your school life, your likes dislikes, passions and fears and what has brought you to this point in your life Provide reasons why you are requesting a bursary and why you believe it should be awarded to you.



Section G: Declaration and Signatures

I declare that the information contained in this application and the required supporting documentation to be true and correct according to my knowledge. I understand that my application is not a guarantee for funding. I understand that bursaries are awarded and allocated at the discretion of the Bursary Committee, based on the Midmar Group Bursary Policy.

	Name and Surname	Signature	Date
Mother			
Father			
Guardian			
Applicant			

PLEASE NOTE: If there are documents that cannot be produced from the above list, please explain which document and provide reasons why.		
willen document and provide i	reasons why.	
FOR OFFICE USE ONLY:		
Date application received:		
Received by:		
Signature of recipient:		
Comments:		

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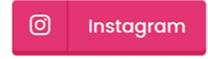
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