



KAAP AGULHAS MUNISIPALITEIT
CAPE AGULHAS MUNICIPALITY
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CAPE AGULHAS MUNICIPALITY

External Bursary Application Form 2023

FOR OFFICE USE ONLY:

Approved	
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Not Approved	
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Conditional Approved	
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INSTRUCTIONS

1. Read carefully before completing, signing, or submitting this form.
2. Ensure that this form is completed in full.
3. Complete in BLOCK LETTERS.
4. Note that this bursary cannot be used to pay for existing loans or debts.
5. Only first-time entrants to an accredited Institution of Higher Learning will be legible for this financial assistance.

Criteria:

1. Ensure that this form is duly signed.
2. Application forms with incomplete information will be disqualified.
3. Application forms with incorrect information will lead to your application being disqualified.
4. No faxed application forms will be accepted.

Attach **ALL** the following documents **REQUIRED**:

Please attach proof of 2022 December/Grade 12 results and other related documents.

NB! No applications will be considered if not accompanied by all required document.

Required documents:	Tick	
1. Application form completed in full with signatures	Yes	No
2. Certified Identity documents	Yes	No
3. Proof of application/admission to the relevant study institution of Higher Education and Training with projected study duration, course Scope, tuition costs and relevant banking details	Yes	No
4. Certified copy of Cape Agulhas Municipality's Utility Bill or account statement	Yes	No
5. In the case of parents/guardian not working original affidavit (South African Police Services) declaring as such	Yes	No
6. In the case of parents/guardian not working original affidavit (South African Police Services) declaring as such	Yes	No
7. Certified copy of December 2022/Grade 12 2022/final results	Yes	No
8. Parents salary advices	Yes	No
9. Parents certified copies of ID's	Yes	No

Post completed forms or hand deliver to:

Post to:	Hand delivers to:
Human Resource & Organisational Development	Cape Agulhas Municipality
Cape Agulhas Municipality	Van Riebeek Street
P.O. Box 51	Old Nedbank Building
BREDASDORP	BREDASDORP
7280	7280
For the attention of: Mrs L May	For the attention of: Mrs L May

SECTION A- PERSONAL DETAILS OF APPLICANT

1. Surname: _____

2. First names: _____

3. Date of birth: _____ Age: _____

4. Identity Number: _____

5. Home Language: _____

6. SA Citizenship: Yes ☐ No ☐

7. Gender: Male ☐ Female ☐

8. Race: African ☐ Indian ☐ Coloured ☐ White ☐

9. Do you have a disability: Yes ☐ No ☐

If YES, describe the nature of the disability: _____

10. Residential address with postal code: _____

Code: _____

11. Postal address with postal code: _____

Code: _____

12. Contact telephone numbers including dialling codes:

Cellular: _____ Parent/Guardian: _____

Other Contacts: _____

Email address: _____

13. Have you ever been found guilty of a criminal offence? Yes ☐ No ☐

If YES, please specify the nature and date of offence: _____

SECTION B- HIGH SCHOOL ATTENDED

1. Name of school: _____
2. School address: _____

- Postal code: _____
3. Local Municipality: _____ Town: _____
4. Grade: Currently in Grade 12 ☐ Completed Grade 12 ☐
5. Years attended From: _____ To _____
6. **Subjects (List them Below)**

Subject	Grade	Symbol	Percentage

NB: Attached proof of the latest results.

SECTION C – INTENDED TERTIARY STUDY FOR THE NEW ACADEMIC YEAR

1. Name of qualification: _____
2. Name of Institution: _____
3. Field/Area of study: _____
4. Period of study in years: _____
5. Are you receiving any other bursaries or loan? Yes ☐ No ☐

If YES, describe below the nature of financial assistance and any obligations involved and provide the name of the institution that granted the bursary/loan assistance:

(Please attached proof of admission to accredited tertiary institution)

SECTION D (Parent 1) – DETAILS OF FATHER / MOTHER/ GUARDIAN

1. Name and Surname: _____

2. Identity No: _____

3. Relationship: Mother ☐ Father ☐ Other ☐ Specify: _____

4. Residential address with postal code: _____

Code: _____

5. Postal address with postal code: _____

Code: _____

6. Contact telephone numbers including dialling code: _____

Home: _____ Work: _____

Cellular: _____

Email address: _____

EMPLOYMENT DETAILS OF (Parent 1) FATHER /MOTHER /GUARDIAN -

7. Name of employer: _____

8. Monthly Salary: _____

9. Address of Employer: _____

Code: _____

10. Contact telephone details of Employer: _____

Parent 2: DETAILS OF FATHER / MOTHER/ GUARDIAN

11. Name and Surname: _____

12. Identity No: _____

13. Relationship: Mother ☐ Father ☐ Other ☐ Specify: _____

14. Residential address with postal code: _____

Code: _____

15. Postal address with postal code: _____

Code: _____

16. Contact telephone numbers including dialling code: _____

Home: _____ Work: _____

Cellular: _____

Email address: _____

EMPLOYMENT DETAILS OF FATHER /MOTHER /GUARDIAN

17.Name of employer: _____

18.Monthly Salary: _____

19.Address of Employer: _____

Code: _____

20.Contact telephone details of Employer: _____

SECTION E – DETAILS OF FAMILY

Please list those who are dependent on the family's income (stated below) start with yourself, followed by your spouse (if any) and then any other dependants.

Note:

If the person received income from more than one source, please list them all. If the income is from wages or a salary, please submit a copy of the latest pay slip with this application. If the income is from the profit of a business, please submit a copy of the official financial statement of the business submitted to the tax authorities, last year. If the income is from child support as a result of a divorce, please supply a copy of the relevant sections of the divorce documents.

Name	Age	How is this person related to you (e.g. wife, son)	Please state: Employment, Scholar, Student, unemployed, etc	If not employed state how income is derived / family is supported (Attach proof of retrenchment/ unemployment, etc)	Source of income i.e. Wages? Salary? Pension? Child support? Interest on investments? Business profit?	How much does the person receives from this source each month? Proof of all income must be provided. (See the note at the foot of the page.)

Note 1:

- If you are married, widowed or divorced, or
- If you have supported yourself for more than 3 years, or
- Both your parents are deceased, then please complete section E as the head of the household.

Note2:

- Please attach Identity documents, pay slips or business statements of each of the members listed above
- If a member is unemployed and has no source of income, affidavit must be attached to attest such

[illegible]

SECTION F – DECLARATION

1. I, hereby declare that **ALL** the information provided in this application form is complete and correct.
2. I, hereby acknowledge that if **ANY** of the information provided in this application form is found to be incomplete and/or incorrect, my application will be disqualified.

3. Signature of

APPLICANT: _____

Name: _____

Date: _____

4. Signature of

PARENT / LEGAL GUARDIAN: _____

Name: _____

Date: _____

SECTION G – CHECKLIST

Please attach proof of June/Dec 2022 results and other related documents.

NB! No applications will be considered if not accompanied by all required document.

Required documents	Tick	
1. Application form completed in full with signatures	Yes	No
2. Certified Identity documents	Yes	No
3. Proof of application/admission to the relevant study institution of Higher Education and Training with projected study duration, course Scope, tuition costs and relevant banking details	Yes	No
4. Certified copy of Cape Agulhas Municipality's Utility Bill	Yes	No
5. In the case of parents/guardian not working original affidavit (South African Police Services) declaring as such	Yes	No
6. In the case of parents/guardian not working original affidavit (South African Police Services) declaring as such	Yes	No
7. Certified copy of December and/or final year results/previous results	Yes	No

POPIA DISCLAIMER

The Information Officer (Municipal Manager) undertakes that all personal and confidential information will be processed lawfully and in a reasonable manner that does not infringe the privacy of you or your organisation as the data subject. The processing is necessary and complies with an obligation imposed by law on us, the responsible party and the processing protects your rights to effective service delivery.

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