**APPLICATION FOR BURSARY 2023**

In order to be considered for a bursary, Horticulture and Landscaping students must have successfully completed and passed their first-year modules of study in full and have an average of over 60%. We do not provide bursaries for the practical training required for the qualification.

A motivation of no less than 150 word needs to accompany all applications to be considered for a bursary.
The following questions must form the basis of your motivation along with additional points:

* How do you see your career in the green industry developing?
* Have you done any community volunteer work? If so, where and for how long and what was your experience of it?
* Have you been involved in the horticultural industry? If so, were you a volunteer or employed and what where the main lessons learnt through that experience?
* Have you visited any nurseries? If so, where and what would you say was the most impressionable?
* What is the distance to your nearest nursery and what is it called?

**NB: By not giving a comprehensive motivation your application may not be**

**considered.**

Please attach a photograph of yourself e.g. a portrait photograph, student card photo or selfie.

All applicants must have completed and passed all first academic year subjects before their applications will be considered. All applicants may be contacted for an interview with a SANA representative in their region.

A copy of your ID must be submitted along with your application. If additional supporting documents and ID are not attached, or the application form is not completed correctly, the application will be rejected.

Closing date for consideration will be 31 March 2023 and interviews will follow in April.

**NB:** Incomplete applications will not be considered.

Bursary Applications can be submitted via email to wendy@sana.co.za or by Fax 086 580 9793:

1. Surname: ………………………………………………………………….………..

1. Name: …………………………………………………...………………………….
2. Date of Birth: …………………………………………………………….………
3. Citizenship: ………………………………………………………………………

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| **Student No**:  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Institution:** |  |
|  |  |  |
| **Region:** |  |

1. Marital Status: ……………………………………………………………………
2. Number of children and other dependents: …….…………………………….
3. Residential Address: ………………………………………………………………………..………………….
4. Contact Details

Cell Phone number: …………………………………………………………………..

Work Telephone: …………………………………….……..…………………………

Alternative contact: …………………………..……………………………………….

E-mail Address: ……………………………………………...………………………..

1. Current Working Status (please tick applicable block)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  Working |  |  Unemployed |  |  Full time student |  |
|  |  |  |  |  |  |

**If working, please give details of employment:**

……………………………………………………………………………………………………………

1. Work experience including number of years. Have you had any previous experience working in a nursery or landscaping? Where, when and for how long at each company?

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1. Community projects: Have you participated in any community projects, if yes please give details of where and when:

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1. Name of Qualification: …………….……………………………………………………………………

**NB: First Year of Registration:** …………………………………………………………………

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1. Year of Current Studies: ………………………………………………………………………………
2. Where do you live and are you studying in the same place? If not, which town are you studying in?

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1. STUDENT’S ACADEMIC RECORD

Please attached a copy of your academic record for each year passed – compulsory

1. a) How have you paid for your tuition so far?

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b) Have you applied for a NSFAS loan for 2023?

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1. Outstanding Monies with Institution  YES  NO

Amount: R ………………………………………………………………………………………………..…..

Subjects to register for the **NEW** Academic year:

Subject Subject Code Cost

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1. Details of previous other studies undertaken **- Enclose copies of all certificates**:

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1. Describe which area of horticulture/landscaping you would like to work in once qualified and why:
i.e. grower, retailer, landscaping etc.

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1. Details of parent or guardian

1. Name ……………………………………………………………………………………………………

	1. Residential address: …………………………………………………………………………..……………………………..…

	……..……………………………………..……………………………………….…………………..….

Contact telephone number: ……………………………………………………………………………………………………………

1. **PLEASE GO THROUGH THE CHECK LIST ON THE FIRST PAGE TO ENSURE THAT THE APPLICATION IS COMPLETE. IF ALL BLOCKS ARE NOT TICKED, THE APPLICATION WILL NOT BE TAKEN INTO CONSIDERATION**

I (full name and surname)………………………………………………... certify that the information provided in the application is correct and true.

……………………………………..…………….. ……..…………………………………..

 Applicant: Date: