

## LIS AND ARCHIVES BURSARY APPLICATION FORM

**CLOSING DATE: 30 September 2023** 

	FOR OFFICE USE ONLY
R	eference Number Date of Receipt
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certifi	cures listed below must accompany the application - please send only <b>ed copies</b> of documentation, because the annexures will not be returned to plicant.
	All Questions are answered fully
	A certified copy of applicant's Identity Document/Passport
	Certified proof of all academic qualifications
	A curriculum vitae of the applicant.
	Proof of residence
	Written proof of acceptance from the proposed study institution or tutor where the applicant will receive the training
	Copies of any quotations
I hav	'e
	Signed the application form
	Copied this application form and kept it for my reference and sent an original copy of the application form
	Provided reasons why I need the bursary

## FIELDS OF STUDY

# PLEASE MARK (1) ONE APPROPRIATE BOX WITH AN X

Bachelor degree Library and I	nformation Science
2. Bachelor degree in Archive ar	nd Records Management
SECTION 1: PERSONAL DETAI	LS
1.1 Applicant's Surname	:
1.2 Applicant's Full Names	:
1.3 Title: (e.g. Mr/Ms/Miss/Dr)	÷
1.4 Applicant's Identity Number (Attach a certified copy)	:
1.5 Date of Birth	: Age:
1.6 Postal Address (Where correspondence can be sent to)	:
	Postal Code:
1.7 Physical/Residential Address (Where applicant lives)	:
	Province:
1.8 Telephone Numbers (Where applicant can be reached dur	:ing the day)
Cell Number	:

Alternative Contact (Parent, Gu	ardian, etc.)
Name	<b>:</b>
Relationship	:
Contact Details	:
SECTION 2 : COURSE DETAILS	3
2.1 Intended course of study (e.g. Diploma, BA, MA)	÷
2.2 Name of course	:
2.3 Duration of course	<b>:</b>
2.4 Year of study (e.g. BA 3)	<b>:</b>
2.5 Period for which assistance is	needed (e.g. Jan-Dec 2024) :
2.6 Please provide certified copapplication:	pies of the following documents to accompany your
<ul><li>a) Proof of admission or</li><li>b) Registration proof</li></ul>	
SECTION 3 : INSTITUTIONAL D	ETAILS
3.1 Name of institution/school	:
3.2 Address of institution/school	÷
3.3 Name of department	:

2.4. Postal code : \_\_\_\_\_ Telephone number : \_\_\_\_\_

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Name of sponsor	Course	Year

#### **SECTION 4. FINANCES**

## 4.1 Budget

All cost should be reflected in **South African Rand**.

### 1. DESCRIPTION OF EXPENDITURE FOR ONE YEAR ONLY

REGISTRATION FEE/APPLICATION FEE:	
COURSE FEE/STUDY FEES:	
BOOK FEES	
TOTAL	R

## 4.2 Motivation for Gauteng Sport, Arts, Culture and Recreation funds

Please motivate for Gauteng Department of Sport, Arts, Culture and Recreation funds towards your studies and say what you need the funds for, where will the study lead to and what will be the benefits for you and the Gauteng society. (If the space provided is not sufficient, please write your motivation on a separate page and attach it to your application).

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4.3. Provide the insti ensure that these are			letails – Bursary D	epartment (Please
Account Name	:			
Bank Name	:			· · · · · · · · · · · · · · · · · · ·
Branch Name	:	<del></del>		
Bank Telephone	:	<del></del>		
Branch Code	:		A/C Number:	
SECTION 5: DECLAF	RATION			
I hereby declare that a documentation are tru			this application and	d accompanying
Signature of Applicant	<del></del>		Date	
Print Name and Surna	ıme			-
Signature of Parent/G	 uardian (It	f applicant is a min	or)	
Print name and Surna	me			Date