

	Document or
l	Record No.

HR-F23

Revision No.

02

Title

External Bursary Application Form

## **EXTERNAL BURSARY APPLICATION FORM**

NEW / EXISTING APPLICATION (which is applicable)

A. Personal Details						
Surname:						
First Names:						
Gender:						
Date of Birth;						
ID Number:		Ag	e:			
African As	sian Colo	oured I	ndian	White		
Disability: Yes	No:		(If yes, attac ort documer		medical	
Marital status:	***************************************	••••				
Home Language:		••••				
PHYSICAL ADDRESS	:					
POSTAL ADDRESS:						
Cellphone:						
Tel. no.: (h)						
Tel.: (w)						
Fax no.:						
E-mail.:						



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B. Academic History: Schooling:				
Institution:				
Highest Standard Passed:				
Year Completed:				
Subjects Passed In Highest Standard:				
(Attach certified copies of qualifications)				
Tertiary Education:				
INSTITUTION:				
1 <sup>ST</sup> DEGREE/DIPLOMA/COURSE/QUALIFICATION				
HIGHEST LEVEL PASSED:YEAR COMPLETED:				
SUBJECTS PASSED:				
2 <sup>ND</sup> DEGREE / DIPLOMA / COURSE / QUALIFICATION				
INSTITUTION:				
HIGHEST LEVEL PASSED: YEAR COMPLETED:				
SUBJECTS PASSED:				
(Attach certified copies of qualifications)				

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## C. STUDY PLAN

Study course for	which assistance is appl	lied:				
Name of institution where course is to be held:						
3. Intended duration of study course:						
schedule.)	indicate below in detail the course/s you intend to take as well as the proposed chedule.)					
EAR & SUBJECTS 20	YEAR & SUBJECTS 20	YEAR & SUBJECTS 20	YEAR & SUBJECTS 20			
MATIVATION, M		1.1				
MUTIVATION: M	otivate reasons for intend	ded course of study:				
	Name of institution Intended duration Course details: (Indicate below schedule.)  rse details from the EAR & SUBJECTS 20	Name of institution where course is to be  Intended duration of study course:  Course details: (Indicate below in detail the course/s ye schedule.)  rse details from the institution must be at EAR & SUBJECTS 20  YEAR & SUBJECTS 20	Intended duration of study course:  Course details: (Indicate below in detail the course/s you intend to take as we schedule.)  rse details from the institution must be attached.  EAR & SUBJECTS YEAR & SUBJECTS YEAR & SUBJECTS			

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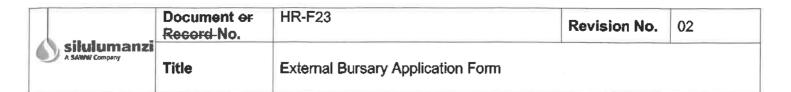
## COST:

COST	CURRENT YEAR 20	YEAR 20	YEAR 20	YEAR 20
Registration Fees				
Tuition Fees				
Books				
Examination Fees				
TOTAL				
Other financial assistance	e: Yes	No		
yes:	Name and	d address	of	institution:
		<del></del>		

## D. DETAILS ABOUT PARENTS/GUARDIAN/NEXT OF KIN

Please attach the following documentation to this application:-

- Applicant's Birth Certificate and identity document
- Applicant's Grade 12 certificate or proof of highest level of education acquired.
- The previous year's examination results.
- Any supplementary examination results, where applicable.
- Proof of registration at University / College / Technikon / School.
- Statement / account / invoice / receipt from the University / Technikon / College / School concerned to show the cost of study (where not possible, an estimate of these costs). This must be done in writing. Education Committee to assist in this regard where necessary.
- Family income or an affidavit parents are unemployed (N.B: The company may use additional measures such as house visits, welfare workers assessment or other means to verify a candidate's previously as advantaged and/or economic status)
- Admission letter



DECLARATION				
I, the undersigned, hereby acknowledge that I am fully acquainted with and accept the terms and conditions of the Sembcorp Silulumanz External Bursary Scheme. I further certify that the information supplied in this application is correct and that, if I am awarded a bursary, I will abide by the bursary rules and conditions applicable				
APPLICANT'S NAME	DATE			
SIGNATURE				
IF STILL A MINOR, SIGNATURE OF PARENT/GUARDIAN				
	DATE			

