

LIS AND ARCHIVES BURSARY APPLICATION FORM

CLOSING DATE: 30 September 2024

	FOR OFFICE U	SE ONLY		
R	Reference Number	Date of Receipt		
certifi	kures listed below must accompany tied copies of documentation, because oplicant.	he application - please send only se the annexures will not be returned to		
	All Questions are answered fully			
	A certified copy of applicant's Ident	ity Document/Passport		
$\overline{\square}$	Certified proof of all academic qual	fications		
	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 ke 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 Inf	formation science
2. Bachelor degree in Archive and	Records Management
SECTION 1: PERSONAL DETAILS	3
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 :	The dead
(Where applicant can be reached during Cell Number	g the day)

Alternative Contact (Parent, Gu	ardian, etc)
Name	;
Relationship	:
Contact Details	:
SECTION 2 : COURSE DETAILS	5
2.1 Intended course of study (e.g. Diploma, BA, MA)	:
2.2 Name of course	: <u></u>
2.3 Duration of course	:
2.4 Year of study (e.g. BA 3)	:
2.5 Period for which assistance is	needed (e.g. Jan-Dec 2025) :
2.6 Please provide certified copapplication:	pies of the following documents to accompany your
a) Proof of acceptance to stub) Letter of invitation to the co	
SECTION 3 : INSTITUTIONAL D	ETAILS
3.1 Name of institution/school	:
3.2 Address of institution/school	:
3.3 Name of department	:
3.4. 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 inst ensure that these ar		nking account deta	ails – Bursary D	epartment (Please
Account Name	:			
Bank Name	:			
Branch Name	:			
Bank Telephone	:			
Branch Code	:		A/C Number:	
SECTION 5: DECLA I hereby declare that documentation are true	all the inform		is application and	d accompanying
Signature of Applican	nt		Date	
Print Name and Surn	ame			-
Signature of Parent/G	 Suardian (If a	pplicant is a minor)		
Print name and Surna	ame			Date