



KWAZULU-NATAL PROVINCE
COOPERATIVE GOVERNANCE AND
TRADITIONAL AFFAIRS
REPUBLIC OF SOUTH AFRICA

COGTA

BURSARY APPLICATION FORM EXTERNAL BURSARIES

Name of the applicant: _____

University you intend to study at: _____

Name of the qualification which you are applying for: _____

District Municipality: _____

Local Municipality: _____

Ward: _____

Instructions: Your completed Application Form must be accompanied with the following documentation:

- 1) Certified copy of Matric certificate if you have completed your grade 12 or a copy of your Grade 11 year end results and grade 12 half year results if you are still in school.**
- 2) Certified copy of your official academic record showing marks, symbols, percentages obtained in all examinations if currently studying at a tertiary institution.**
- 3) Certified copy of your identity document and your parent's/guardian's ID's.**
- 4) Copy of acceptance letter from the tertiary institution for the intended qualification**
- 5) Proof of non-acceptance by tertiary institutions in KwaZulu Natal if studying outside of the KwaZulu Natal Province.**
- 6) Copy of the curriculum (indicating the number of years of study, number of modules/subjects to be taken) from the academic institution for the intended qualification.**
- 7) Printout from the academic institution of the tuition fees that will be required**
- 8) Income and expenditure statement of parent/legal guardian. Proof of income must be provided or a letter from the Department of Labour - parent/s stating that they are unemployed.**
- 9) Copy of certified death certificate/s of parent/s.**
- 10) Proof of Residence**
- 11) Letter of motivation (explain why you believe you are deserving of a bursary outlining your circumstances).**

*** Please turn over to complete the form and ensure that the form is fully completed and signed by student and parents.**

*** all documentation mentioned above must be attached.**

<p>Please print when completing this form. Mark appropriate blocks with an “X” Failure to complete this application form fully and correctly may prejudice the applicant’s chances of obtaining a bursary.</p>	<p>Submit the completed application form and the relevant attachments to: The Bursary Unit, Human Capital Development, Department of Cooperative Governance and Traditional Affairs, Private Bag X9078, Pietermaritzburg, 3200 / Natalia Building, 330 Langalibalele Street, Pietermaritzburg.</p>
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PERSONAL PARTICULARS

FIRST NAMES: _____	
SURNAME: _____	
IDENTITY NUMBER: _____	DATE OF BIRTH: _____
POSTAL ADDRESS: _____ _____	PHYSICAL ADDRESS: _____ _____
TELEPHONE NUMBER: (____) _____	DISTRICT: _____
CELL PHONE NUMBER: _____	LOCAL MUNICIPALITY: _____
ALTERNATE NUMBER: _____	WARD NUMBER: _____
FAX NUMBER: _____	COUNCILLOR: _____
NATIONALITY: _____	MARITAL STATUS: Single/Married/Divorced/Widowed
GENDER: Male/female	DISABILITY: YES/NO _____ If yes, please elaborate _____ _____
RACE: Black/Coloured/Indian/ White	Are you currently employed? YES/NO If yes, please elaborate _____ _____

Have you ever been convicted of a criminal offence, dismissed from employment or requested to resign? YES/NO If the answer is yes please furnish full details on a separate sheet of paper.	Did you consult a vocational counsellor regarding your choice of study? YES/NO
Have you previously received a Public Service Bursary? YES/NO	
If yes – for which year and how long? _____	
Are/were you in possession of another bursary/scholarship/financial aid? (i.e NSFAS) YES/NO	
If the answer is yes please indicate the name of the donor: _____	
Obligations attached to bursary/scholarship/financial aid: _____ _____	
Do you have any other tertiary qualifications: _____ _____	
If yes please list the qualifications obtained: _____ _____	
Name of the degree or diploma which you are applying for: _____ _____	
What will the major subjects be for the degree or diploma? _____	
Number of years you intend studying for: _____	
Name of tertiary institution you intend studying at: _____	
Provisional acceptance from the tertiary institution at which you intend studying	
Received or Not Received: _____	
QUALIFICATIONS	
Highest standard passed: _____	Name of school attended: _____
	Town/city: _____

UNIVERSITY AND/OR OTHER POST SCHOOL TRAINING/STUDIES

<p>List the subjects passed thus far:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>Address of institution/college:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Current year of study:</p> <hr/> <hr/>	<p>Name of degree/diploma:</p> <hr/> <hr/>
<p>What is the remaining duration of your current studies as prescribed by the tertiary institution?</p> <hr/> <hr/>	<p>List the subjects that still need to be completed to obtain the relevant qualification:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Please indicate the year you started studying for the current course of studies:</p> <hr/> <hr/>	<p>Have you ever failed any year of study? YES/NO</p> <p>Which year? _____</p>
<p>Have you rewritten the examination/s for the subject/s failed? If yes, please indicate the date of the examination:</p> <hr/> <hr/>	<p>Student number at current institution:</p> <hr/> <hr/>

Full name of parents/legal guardians :

Father:

Mother:

Contact details of parents/legal guardians:

Father: Tel Number: _____ Cell phone number: _____
Mother Tel Number: _____ Cell phone number: _____

Address of parents/legal guardians:

Employer of parents/legal guardians:

Father:

Mother:

Address of employer of parents/legal guardians:

Father:

Mother:

REVIEW, SUSPENSION AND EXTENSION

The Provincial Administration reserves the right, at any time and on any terms or conditions to:

- a) review the continuation of the bursary; or
- b) suspend the bursary; or
- c) having suspended the bursary, reinstate the bursary; or
- d) Extend the period of the bursary.

DECLARATION

I understand that this application for a bursary is not a loan and declare that the above particulars are complete and correct.

SIGNATURE OF APPLICANT

DATE

WITNESS

DATE

SIGNATURE OF PARENTS/LEGAL GUARDIANS:

MOTHER

FATHER

DATE: _____

WITNESS

DATE