

**PERSONAL DETAILS** 

# **APPLICATION FORM**

#### **STUDENT FINANCIAL ASSISTANCE**



Please print clearly when completing this form. Failure to complete this application form fully and correctly may prejudice the Applicant's chances of obtaining a bursary.

Surname:	
First Names	
Gender	
CONTACT DETAILS	
Physical Address	
Area	
Ward	
Contact number	
Alternative number	
Email Address	
QUALIFICATIONS	
Highest Grade Passed	
Name of school attended	
Town/City	
<b>DETAILS OF HIGHER LEAF</b>	RNING INSTITUTION
First year students	
Returning students	











"THE DOORS OF LEARNING SHALL BE OPENED"



If Yes, name of the institution:

#### **2021 STUDENT FINANCIAL ASSISTANCE APPLICATION FORM**

#### TO BE FILLED BY STUDENTS WHO ARE CURRENTLY REGISTERED AT A HIGHER **LEARNING INSTITUTION / FUTHERING THEIR STUDIES**

Are you presently enrolled at a tertiary institution? YES/NO ......

Student number:			
Year of study:			
Name of qualification:			
List the latest subjects or modules	passed:		
Subject	%	Subject	%
Please attach statement of results What is the remaining duration of you		udies as prescribed by the tertiary institution?	<b>)</b>
List the subjects/modules oustanding	to obtain th	e relevant qualification:	
Subject		Subject	
		1	









### **2021 STUDENT FINANCIAL ASSISTANCE APPLICATION FORM**

Please indicate the year which you started studying for the current course of studies:
Have you ever failed any year of study? YES/NO If Yes, which year?
Have you rewritten the examination/s for the subject/s failed? If yes, please indicate the
date of the examination:
Are/were you in possession of another bursary/scholarship/financial aid?
YES/NO
If the answer is yes, please indicate the name of the Donor
Obligations attached to bursary/scholarship/financial aid:
DETAILS OF THE PARENTS OR GUARDIAN OF THE APPLICANT
Full name of parent/legal guardian:
Marital status:
Occupation:
Employed or unemployed?
If employed please indicate the annual gross income of parent or legal guardian:
Less than R60 000 per annum
Less than R120 000 per annum
DECLARATION
I understand that this application for a bursary is not a loan and declare that the above particulars are complete and correct. I also understand that the bursary is granted as a once off support programme. I also understand that the municipality is not obliged to award me the bursary every year. I also accept that the municipality is under no obligation to offer me any employment opportunity with this application.
Signature of Applicant:
Date:













## **2021 STUDENT FINANCIAL ASSISTANCE APPLICATION FORM**

First Witness				
Name and Surname:				
Date:				
Second Witness				
Name and Surname:				
Date:				
Signature of Parent/I	Legal Guardian:			
Date:				
First Witness				
Name and Surname:				
Date:				
Second Witness				
Name and Surname:				
Date:				
THE FOLLOWING C	HECKLIST MUST ACCOMPANY YOUR APPLICATION:			
1. Letter of motivati	on (explain why you believe you are deserving of a bursary).			
2. An original certified copy of your matric statement of results as well as a certified copy of your endorsed (B/D) Matric certificate (with Matric exemption)				
_	ed copy of your official progress report, indicating marks, symbols, ed in all examinations written.			













# 2021 STUDENT FINANCIAL ASSISTANCE APPLICATION FORM

4. An original certified copy of your Identity Document (ID).	
5. Copy of the admission requirements from the academic institution for the intended course of study if you have not already been accepted.	
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 course of study.	
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 and an affidavit stating that the parent/s are unemployed.	s
9. Original certified death certificate/s of parent/s, if deceased.	
10. Letter of recommendation from Operation Sukuma Sakhe War-Room or Social Workers (Optional)	
11. Letter of proof of residence (Normally issued by the Ward Councillor)	<u> </u>

The application should be submitted in a sealed envelope and should be marked "KwaDukuza Student Financial Assistance 2021" and be submitted to, The Municipal Manager: KwaDukuza Municipality, P.O Box 72, KwaDukuza, 4450 or hand-delivered to KwaDukuza Municipality Youth Development office/Centre, 41-42 Hullet Street.

#### Closing date: 05 March 2021 before 15:00

Application forms are available at the KwaDukuza Municipality Youth Office/Centre, all libraries within the jurisdiction of KwaDukuza and other Municipal offces.

The form can also be downloaded on the KwaDukuza municipal website **www.kwadukuza.gov.za** 

Enquires: Mr Wiseman Cele - **032 437 5170** | wisemanc@kwadukuza.gov.za | Visit the **KwaDukuza Youth Centre**, 41-42 Hullet Street, KwaDukuza 4450 for more information.







