

Certified copies of the following documents should be attached to this application form and sent to the address mentioned below:

- South African Identity Document
- Grade 12 Certificate
- Other Certificates of Tertiary qualifications
- Academic records/transcripts
- Admission Letter
- Research Proposal (for Research studies)

Address: The

The Manager

Human Resource Development

Private Bag X0040

Bhisho 5605

NB. Please submit the application through your area of placement e.g. District or Head Office.

### A. PERSONAL PARTICULARS OF APPLICANT

Company of the control of the contro			
Surname:			
First Names:			
Gender: Male Female			
Disability (Yes/No):			
Type of Disability:			
ID. Number:			
African Coloured Indian White			
Postal Address Residential Address			
Telephone: (W) (H)			
Fax:			
Cell:			
E-mail:			
E-IIIdii.			
B. EMPLOYMENT PARTICULARS			
Persal Number:			
Post Title:			
Post Level:			
Branch:			

Sub-Branch/District: .....

Division:		
Municipality:		
C. EDUCATIONAL QUALIFICATIONS		
Highest Standard passed:		
Name of School:		
Year Passed:		
Subjects and Symbols:		
D. PARTICULARS OF DEGREE/DIPLOMA FOR WHICH YOU WANT TO RECEIVE A BURSARY		
Name of Degree/Diploma/Qualification:		
Ch. Jan L Na		
Student No:		
Level of study you are applying for (e.g. 1 <sup>st</sup> , 2 <sup>nd</sup> , Masters, etc):		
Main Subjects/Courses:		
At which institution/university are you or do you intend studying:		
Period of study:		
Short description or title of proposed research project:		

Indicate the impostance of your study to		
Indicate the importance of your study to	the department:	
F OTHER RUBCARTES OF SPONSORS		
E. OTHER BURSARIES OR SPONSORS		
Do you presently study with a bursary or	loan? (Yes/No):	
If yes, name the bursary or loan:		
Annual value of the bursary or loan:		
Indicate the purpose of the bursary or loan:		
Indicate the purpose of the bursary of loa	HI:	
When did you get the bursary or loan:		
F. DECLARATION BY THE APPLICANT		
T	doctors that the information	
Ideclare that the information		
supplied in this application is correct and that, If I am awarded a bursary, I		
will abide by the rules and regulations applicable.		
SIGNATURE OF APPLICANT	DATE	
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#### F. REMARKS, RECOMMENDATIONS AND APPROVAL

Remarks and recommendations by supervisor:	
SIGNATURE OF SUPERVISOR	DATE
Remarks and recommendations by Senior Manage	r:
SENIOR MANAGER	DATE
Recommended / not recommended	
CHAIRPERSON OF SELECTION COMMITTEE	DATE
CHAIRPERSON OF SELECTION COMMITTEE	DATE
Approved / not approved	
HEAD OF DEPARTMENT	DATE