

HUMAN RESOURCES PROCEDURES MANUAL

APPLICATION FOR A BURSARY

DOC NO: WKP 3.0.2

REV NO: 0

ISSUE DATE: Dec 2009

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STRICTLY CONFIDENTIAL														
PERSONAL PARTICULARS - PLEASE PRINT														
POSITION APPLIED FOR:														
SURNAME:	FIRST NAMES IN FULL:													
POSTAL ADDRESS:	POSTAL ADDRESS:													
	CODE:													
TELEPHONE NUMBERS (INCLUDE CODE) : HOME : () WORK ()														
FACSIMILE NUMBER: () CELLULAR TELEPHONE NUMBER:														
BEST TIME AND PLACE TO COM	NTACT:													
OTHER MEANS OF CONTACT IF NO TELEPHONE:														
NATIONALITY:		1	.D. NO											
IF NOT A SOUTH AFRICAN	(A) HAVE PERM	MANENET R	ESIDENCE?		PERM	MIT NO:			<u> </u>					
CITIZEN DO YOU:	(B) STUDY PER	(B) STUDY PERMIT? PERMIT NO: EXPITY DATE:												
	LANGUAGE:		SPEAK:			READ:		WRITE:						
LANGUAGE PROFICIENCY														
PERCENTAGE FLUENCY OF														
EACH (EG COMPLETELY														
FLUENT WILL BE 100%)														
EDUCATION														
EDUCATION 1. SCHOOL														
HIGHEST STANDARD PASSED	INDIVIDUAL SUBJECTS PASSED													
2. POST SCHOOL (INCLUDE UNIVERITY, TECHNIKON, TECHNICAL COLLEGE)														
NAME AND TYPE OF INSTITUTION		FROM	ТО	TO YEAR OF S		TUDY MAJO		OR SUBJECTS						



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FAMILY BACKBROUND										
FAMILY (Begin with Father)	DATE OF BIRTH		OCCUPATION		COMPANY		CONTACT DETAILS			
	Month / Year	Age	OCCUPATION		OIVII AINT	CONTACT DETAILS				
REFEREES - These people will NOT be contacted without your permission DECLARATION: I DECLARE THAT THE INFORMATION										
NAME POSITION		COMPANY		TELEPHONE		CORRECT AND UNDERSTAND, THAT IN THE F ME BEING EMPLOYED, THAT ANY DELIBE-				
						RATE MISSTATEMENT MAY RENDER MY CONTRACT				
						OF SERVICE NULL AND VOID. I FURTHER DECLARE THAT I HAVE DISCLOSED ALL INFORMATION THAT IS RELEVANT TO HIS APPLICATION.				
						_				
						SIGNATURE:				
					DATE:					