



MUNICIPALITY • UMASIPALA • MUNISIPALITEIT

National Treasury funded Bursary Application form 2022 Study year

PART A: PERSONAL PARTICULARS

Surname:		
First Names:		
Identity Number		
(Attach an original certified copy of your	r ider	ntity document)
PERMANENT RESIDENTIAL ADDRESS (Attach proof of permanent residential address)		
Telephone No - Home		
Cell Number		
Alternative Number		
E-mail Address		

For the purpose of monitoring employment equity in terms of bursaries, it would be appreciated if you would provide information regarding your race, gender and disability.

Gender	Female	Male	Disability (Please specify)		
Race	African 🗌	Coloured 🗌	Indian 🗌	White 🗌	

PART B: HOUSEHOLD CIRCUMSTANCES

MONTHLY HOUSEHOLD INCOME (Attached original certified true copies of payslips or sworn affidavits) Mark option with and X						
R 0 – R 5,000 R 5,001 – R 10,000 R 10,001 – R 15,000 R 15,001 – R 20,000						
State the number of persons dependant on the monthly household income						

Due date for Bursary applications – 19 November 2021

PART C: EDUCATIONAL INFORMATION

Matric mid-ye	ar/y	ear-end results				
Subjects Passed		Subject	Symbol		Subject	Symbol
	1			5		
NB: Please attach official	2			6		
statement of Result	3			7		
	4			8		
(Attach origin	al co	ertified true copy of results)				

PART D: TERTIARY QUALIFICATIONS COMPLETED

Have you completed a tertiary qualification or part-years of a qualification? Please complete below.

NAME OF STUDY COURSE/QUALIFICATION						
NAME OF INSTITUTION						
1 st academic year passed. (E.g., 2019 / 2020)						
Subjects Passed			Symbol		Subject	Symbol
	1			5		
NB: Please attach	2			6		
official statement of Result	3			7		
Rooun	4			8		

1ST ACADEMIC YEAR (Submit proof)

2ND ACADEMIC YEAR (Submit proof)

NAME OF STUDY COURSE/QUALIFICATION						
NAME OF INSTITUTION						
2 nd academic year passed. (E.g., 2020 / 2021)						
Subjects Passed		Subject	Symbol		Subject	Symbol
	1			5		
NB: Please attach	2			6		
official statement of Result	3			7		
	4			8		

Due date for Bursary applications – 19 November 2021

PART E: DETAILS OF PARENT(S)/GUARDIAN(S) (where applicable)

Title:	Mr. Mrs (Mark with and X)
Surname:	
First Names:	
Postal Address	
Address - Home	
Home Telephone No	
Personal Cell Number	
E-mail Address	

PART F: BURSARY PARTICULARS: 2022 STUDIES

QUALIFICATION NAME (E.g. BComm)	
NAME OF HIGHER EDUCATION & TRAINING INSTITUTION	
STUDENT NUMBER (If available)	
REGISTRATION COST (attach proof)	R
CLASS/STUDY FEES (attach proof)	R
STUDY MATERIAL / BOOKS (attach proof)	R
EXAMINATION FEES (attach proof)	R
TOTAL COST PER YEAR	R
SUBJECTS/MODULES ENROLLEI	D/REGISTERED/APPLIED FOR 2022 YEAR
1.	8.
2.	9.
3.	10.
3. 4.	10. 11
4.	11

Due date for Bursary applications – 19 November 2021

PART G: GENERAL INFORMATION

DID YOU RECEIVE A BURSARY FROM STELLENBOSCH MUNICIPALITY IN THE PAST?	YES	NO	
DO YOU RECEIVE A BURSARY FROM ANOTHER INSTITUTION FOR 2022?	YES	NO	
IF YES, STATE THE NAME OF INSTITUTION AND AMOUNT OF BURSARY			
INSTITUTION:	R		

It is the responsibility of the applicant to secure the submission of all required documents. A student will be disqualified in the absence of documented proof. No requests will be made to obtain outstanding documentation.

Kindly use the checklist below to determine if you comply with the bursary requirements.

Checklist for Bursary Application:	Check
Form completed in full	
Proof of address	
Certified copy of Identification included	
Curriculum Vitae	
Recent Mid-year results (proof) if applicable	
Recent Matric/year-end results (proof) if applicable	
Recent exam results if you are 2 nd or 3 rd	
Proof of application or registration at tertiary institution	

I (we) certify that the information contained in this form is true and accurate to the best of my knowledge. I understand that the submission of fraudulent information will lead to automatic disqualification and/or withdrawal of all financial assistance granted in terms of the Mayoral Bursary fund or a claim that all fees be paid back to Stellenbosch Municipality.

Signature of Applicant

Signature of Parent/Guardian (if applicable)

Date

Date