APPLICATION FORM FOR BURSARY

Please print and complete this form:

For Office Use: Discipline:	ATTACH YOUR RECENT PASSPORT PHOTO **(Black and White)**

Please complete the application form thoroughly using BLACK INK and in BLOCK LETTERS
Send it to: Impala Platinum, Bursary Department, P O Box 5683, Rustenburg, 0300
or visit our website www.implats.co.za

INSTRUCTIONS:

- Please read these notes carefully before completing the application form.
- Make sure you read every section and that the information you provide is accurate.
- Mark your choice with a cross in the appropriate block where applicable.
- We welcome applications from persons with disabilities. However, selection will be subject to the physical demands of an occupation related to a degree.

PLEASE NOTE:

1. Incomplete forms will not be accepted.
2. Applications close 31 March and no late applications will be considered.
3. If Impala has not responded within 30 days after the closing date, consider your application as unsuccessful. Correspondence will be limited to shortlisted applicants only.

   Should you qualify for a preliminary interview, it will take place at our Rustenburg operations situated in the North West Province.
4. Please supply ALL information requested or give good reasons why you cannot provide it. Your application will not be considered if you do not have university exemption, within the minimum requirements, that is:

   Maths: Rating Code 5 or 60%
   Science: Rating code 5 or 60%
   English: Rating code 5 or 60%
5. The following should accompany this application form:
   - Certified proof of your results
   - Full details of your academic transcript
   - Certificate of conduct from university (if already studying)
   - A certified copy of your personal identity document
   - Your curriculum vitae / resume
6. NB: Any changes of address or contact details must be forwarded in writing.

1. BURSARY INFORMATION

In which discipline would you like to study?

- ☐ Chemical Engineering
- ☐ Geology (Mining / Exploration)
- ☐ BSC Chemistry
- ☐ Extractive Metallurgy
- ☐ Mechanical Engineering
- ☐ Electrical Engineering (Heavy Current Only)
- ☐ Mining Engineering
- ☐ Accounting B.Com
- ☐ Human Resources B.Com
- ☐ Survey (Mining)

2. BIOGRAPHICAL PARTICULARS

Title: ☐ Miss ☐ Mr. Gender: ☐ Female ☐ Male dd / mm / yyyy

Surname: _____ First Names: _____

Nickname: _____ ID Number: _____

Home Language: _____ Nationality: ☐ RSA ☐ Other

Do you have a disability? _____ If other specify: _____

Size of shoe / boot: _____ Overall size: _____

(This information is needed should you be invited for a site visit)

Postal Address: _____ Code: _____

Physical Address: _____ Code: _____

Contact Tel: ( ) _____ 2nd Contact Tel: ( ) _____

Cell phone: ( ) _____

ALTERNATIVE CONACT SHOULD APPLICANT BE UNAVAILABLE

Relationship: _____

Surname: _____ Initials: _____

Postal Address: _____ Code: _____

Contact Tel: ( ) _____ Cell phone: ( ) _____

PARENT / GUARDIAN

Relationship: _____

Surname: _____ Initials: _____

Postal Address: _____ Code: _____

Is your parent / guardian employed by Impala? ☐ Yes ☐ No If yes, where? _____ Industry No. _____

If no, by whom? _____ Work Tel No: ( ) _____

3. EDUCATIONAL DETAILS

Are you still attending school? ☐ YES ☐ NO Grade: _____

Name of School: _____

Postal Address: _____ Code: _____

Contact Tel: ( ) _____ Fax Number: ( ) _____

Year of Matriculation: _____

Please attach a certified copy of most recent results / matric certificate

4. UNIVERSITY STUDENTS

Year of Study (current)_____ Support Programme 1st 2nd 3rd 4th

Name of University: _____ Course: (e.g. Bsc Mech Eng II)_____

Student Number: _____

Please attach a certified updated academic record from the institution

Do you have a bursary at present? ☐ YES ☐ NO If yes, from whom? _____

What is the value of the bursary?_____

Are there any work or financial obligations attached to this bursary? ☐ YES ☐ NO

If yes, give details: _____

Authorised Signature of applicant: _____ Date: _____

5. CAREER

Do you currently have a scholarship, bursary or loan? ☐ YES ☐ NO

If yes, what is the name of the award? _____

Who has it been awarded by? _____

What is the value of the award? _____

Is there a service obligation attached to the scholarship, bursary or loan? ☐ YES ☐ NO

Have you been employed since leaving school? ☐ YES ☐ NO ☐ Full Time ☐ Part Time

If yes, give details and attach a record of service or testimonial.

Details of current and / or previous employment:

EMPLOYER	OCCUPATION	YEAR	
		FROM	TO

6. DECLARATION

I herby give consent to undergo any medical tests / examinations required by IMPLATS.

1. I confirm that the information contained in this application is, to the best of my knowledge, correct and truthful and I understand that if it is not fit, I may be eliminated from consideration in the selection process. If, after being admitted to the training scheme, any falsehoods or omissions are discovered in my application, I understand that my Bursary Agreement may be terminated.

2. I understand that all statements in my application may be investigated and I authorize the organization to contact the following person who might be able to speak about my abilities and suitability for the bursary for which I have applied.

   _____

   _____

   _____

3. I understand that an investigation of me might include reference checks from my school / university / technikon / previous employer/s. I authorize any school / university / technikon / employer to provide IMPLATS with relevant information and opinions that may be useful in making a decision, and release such persons and organizations from legal liability in making such statements. (Please specify persons / institutions you would like us to have contact).

   _____

   _____

   _____

4. I hereby indemnify IMPLATS or any IMPALA company, their Training Managers and Training Officials against any claim for illness or accidental injury sustained by me during a visit to their operations, should I be invited to attend such a visit.

   Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

RECEIPT / SHORLISTED ☐ **Yes** ☐ **No**

Officials Name: _____ Officials Signature: _____

Date: _____ Decision: _____

Comments: _____

_____

PAPER SELECTION SCREENING

Officials Name: _____ Officials Signature: _____

Date: _____ Decision: _____

Comments: _____

_____

FORMAL INTERVIEW

Officials Name: _____ Officials Signature: _____

Date: _____ Decision: _____

Comments: _____

_____

FINAL RESULTS

Officials Name: _____ Officials Signature: _____

Date: _____ Decision: _____

Comments: _____

_____