

Bursary Application Form Full Time Bursaries 2018



Full time Bursary application form

INSTRUCTIONS

- 1. Read carefully before completing, signing or submitting this form.
- **2.** Ensure that this form is completed in full.
- 3. Complete in BLOCK LETTERS.
- **4.** Note that this bursary cannot be used to pay for existing loans or debts.

Criteria:

- 5. Ensure that this form is duly signed.
- 6. Application forms with incomplete information will be disqualified.
- 7. Application forms with incorrect information will lead to your application being disqualified.
- **8.** No faxed application forms will be accepted.
- 9. Attach ALL of the following documents REQUIRED:
 - 8.1 Certified copy of the latest academic transcript or record on official letterhead or logo (if you are already at university, university of technology or college).
 - 8.2. A one page motivation/ covering letter
 - 8.3. Certified copies of achievement / merit certificates
 - 8.4. Certified copy of a valid South African identity document.
 - 8.5. Applications received after the closing date will not be considered.
 - 8.6. Post completed forms to or hand delivered to:

The Chief Executive Officer,
The South African Weather Service,
Private Bag X097, Pretoria 0001,
For the attention: Ms G Maphisa

8.7. CLOSING DATE: 20 October 2017



Full time Bursary application form

SECTION A - PERSONAL DETAILS OF APPLICANT

1.	Surname													
2.	First names													
3.	Date of birth													
4.	Place of birth													
5.	Identity No.													
6.	SA Citizenship	Yes					No							
7.	Gender	Male					Fer	nale						
8.	Race	African			Indian		Col	oured			Wh	ite		
9.	Do have a disability	Yes If YES, des	Yes No If YES, describe the nature of disability:											
10.	Residential address with postal code													
11.	Postal address with postal code													
	Contact telephone	Home						Cellular						
12.	numbers including dialing codes	Parent/ Guardian						Other Contact	ts					
13.	Email address													
	Have you ever been	Yes					No							
14.	found guilty of a criminal offence?	If yes, ple	ease s	pecif	y the r	nature an	d dat	te of of	fence	2:				



SECTION B - HIGH SCHOOL ATTENDED

1.	Name of school						
2.	School address						
3.	Province						
4.	Grade (Please tick)	Currently in G	Grade 12		Completed G	rade 12	
5.	Years attended	From:			То:		
6.	Subjects (List them below)		Higher Grade	Symbol	Standard Grade	Symbol	Percentage
6.1							
6.2							
6.3							
6.4							
6.5							
6.6							
6.7							
6.8							
6.9							

NB: Attach proof of the latest results.



SECTION C - POST MATRIC QUALIFICATIONS

1.	Full name of highes qualification	it						
2.	Nature of qualificat	ion	Degree		Diploma	riploma		
3.	Status		Presently studying					
4.	If discontinued, for reasons?	what			,			
5.	If presently studyin year of study? (Please tick)	g, which	First Year	Second Year	Third Year	Fourth Year		
6.	Student number			•				
7.	Name of institution	1						
8.	Address of institution	on						
9.			Major Subje	Marks/ % obtained				
	10.1							
Li	st the subjects	10.2						
		10.3						
		10.4				22.1.12		
10.			Auxiliary sub	jects		Marks/ % obtained		
	11 11 List the subjects							
Li								
		11.4						
		11.5						
		11.6						
		11.7						

NB: Attach proof of latest academic results or academic transcript/s



SECTION D - INTENDED STUDY FOR THE NEW ACADEMIC YEAR (Please mark with 'X')

1.	Name of qualification	Bachelor of So	National Certificate in Weather Observation Bachelor of Science in Meteorology/Atmospheric Sciences etc. Honours in Meteorology/Atmospheric Sciences etc.							
		Honours Bridging programme								
2.	Do you have a driver License?	Yes	NO							
_	Are you receiving any other bursary	Yes		•	If YES, describe below the nature of financial assistance ar obligations involved and provide the name of the institute that granted the bursary/ loan assistance:	•				
3.	or loan?		·							

SECTION E – DETAILS ABOUT PARENT(S) / GUARDIAN(S) / NEXT OF KIN

	1										
1.	Surname										
2.	First names										
3.	Identity No.										
4.	Relationship	Mother	Fath	er	Othe	er, spe	ecify:				
5.	Residential address with postal code										
6.	Postal address with postal code										
_	Contact telephone	Home					Cellu	ular			
7.	numbers including dialling codes	Work					Oth	er tacts			
8.	Email address										



SECTION F – DECLARATION

•							1			
1.	i nereby.	declare that	t ALL the ini	ormation	provided i	n this a	pplication	torm is	complete and	d correct.

2.	I hereby, acknowledge that if ANY of the information provided in this application form is found to b	e
	incomplete and/or incorrect, my application will be disqualified.	

J.	Jigili	ature or						
	3.1	APPLICANT:						
	3.2	Date :						
4.	Signa	ignature of						
	4.1	PARENT / LEGAL GUARDIAN :						
	4.2	Date :						