BURSARY APPLICATION - 2025

VGI CONSULTING

PERSONAL DETAILS

Full Name(s): _____

Last Name: _____

Date of Birth: | D | D | M | M | Y | Y | Gender: ☐ Female ☐ Male

Race Group: _____

Nationality: _____

ID Number: | | | | | | | | | | | | | |

E-mail Address: _____

Cell Number: | + | 2 | 7 | | | | | | | | |

Other Contact Number: | + | 2 | 7 | | | | | | | | |

Physical Address: _____

_____

_____

_____   Postal Code: _____

Parent or Guardian's Name: _____

Contact Number: _____

Name of Employer: _____

Occupation: _____

Employer Contact Number: _____

Parent or Guardian's Name: _____

Contact Number: _____

Name of Employer: _____

Occupation: _____

Employer Contact Number: _____

Gross Annual Household Income: _____

COURSE DETAILS

Name of University: _____

Course Registered For (In Full): _____

Current Year of Study: Year ⋯ of ⋯ Years

Final Year of Study: | M | M | Y | Y | Y | Y |

Total Course Duration: _____

Have You Had Previous Financial Assistance: _____

If Yes, State Reason Why You Require Further Financial Aid:

_____

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ACADEMIC QUALIFICATIONS

Latest Results		First Year Results		Grade 12 Results	
Subject	%	Subject	%	Subject	%

FINANCIAL DETAILS

Item	Cost (R)
Current balance on student financial statement	
Estimated costs for proceeding year of study	

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MOTIVATION

Give detailed motivation, on why your application for a bursary should be considered.

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ATTACHMENTS

Please use the below checklist to ensure that all required documentation is attached. Applications with incomplete documentation will not be considered.

Attachment	Check
Fully Completed Bursary Application Form	☐
Certified Copy of ID	☐
Certified Copy of Grade 12 Certificate	☐
Proof of Registration	☐
Certified Academic Record	☐
Latest University Financial Statement	☐

DECLARATION

I, _____(Full Name(s) & Surname), ID number _____, hereby declare the details furnished hereabove by myself are true and accurate to the best of my knowledge.

I declare that I understand the questions asked above, and that all questions were answered truthfully.

Signed on this day the,_____ of _____20_____ at _____ (Location).

_____
Signature of Applicant

Important:

Incomplete applications will not be considered.

Applications with documents that have not been certified, will not be considered.

Make sure that the documents submitted are not password protected.

Applications with password protected documents will not be considered.

Applicants must provide complete and accurate details.

Please return the application form to ZinhleM@vgi.co.za.

Application for bursary is for South African Nationals only.

Closing date for application is the 30th of September 2024.