

## **BURSARY APPLICATION FORM**

Please mark your answer with an "x" (cross) where applicable.													
Ensure that all fields are completed, and all supporting documentation is attached.													
Incomplete application forms will not be considered.													
SECTION 1: APPLICANT'S PERSONAL INFORMATION													
			ID N	0						ARE YO	GENDER		
										Yes	No	M	F
SURNAME						NAM	ES						
DATE OF BIRTH							E NO.						
E-MAIL ADDRESS							NO.						
PHYSICAL ADDRESS													
	POPULATION	ON GI	ROUP				DO.	YOU S	UFFE	R FROM A	DISABILI	TY?	
Black	Coloured Indian White					Yes	No		ŀ	f yes, plea	se specify	/	
SECTION2: ACADEMIC INFORMATION													
Proposed stu next year. (e. Diploma Elec													
where you int	Name of tertiary institution where you intend studying full time next year												
	do you intend completion of y												

SECTION2: ACADEMIC INFORMATION – CONTINUE						
Highest qualification already obtained (e.g. Grade 11 or Grade 12)						
Name of school you currently attending or attended						

SECTION3: SCHOOL RESULTS								
	Provide your results in the relevant spaces below. Please submit proof of results with completed form							
Overall Average (%)	ge Grade 11 results Grade 12 results Pre-lim Grade 12 Final results (%) Grade 12 (%)							

	SECTION 4: FAMILY / GUARDIAN DETAILS														
FATH GUAF SURN	RDIAN							NAME	S						
DATE BIRTI	_							WORK NO.	TEL						
					ID NO									OU A	
													Yes	No	
E-MA ADDF								CELL	NO.						
MARI STAT		Married			Divorces / separated			Single		Deceased		Widowed			
EMPL	EMPLOYED Yes				I	No		TOTAL GROSS MONTLY INCOME (Please provide proof)					R		
NAME	NAME OF EMPLOYER														
OCCUPATION															

SECTION 4: FAMILY / GUARDIAN DETAILS															
MOTH SURN								MOTH NAME							
DATE BIRTH	_							WORK NO.	TEL						
						ID NO							ARE YOU A RSA CITIZEN?		
													Yes	No	
E-MAI ADDR	-								NO.		•				
MARIT STATI					Divorces / separated			Single			Deceas	sed	Widowed		
EMPL	OYED	Yes						TOTAL GROSS MONTLY INCOME (Please provide proof)					R		
NAME OF EMPLOYER							•								
OCCUPATION															
Please provide total number of members of your family who are living at your home, including yourself and your parent(s)															

## **SECTION 5: TESTIMONIAL BY EDUCATOR** I, the undersigned testify as follows concerning the bursary applicant: Academic potential of applicant Leadership qualities of applicant I recommend this applicant for a bursary because: Name & Surname Name of School / **Position** Institution Work tel Cell number number Signature Date Official stamp

SECTIO	N 6: WE WOULD LIKE TO KNOW MORE ABOUT YOU
Please describe yourself	
Please describe your family background and circumstances	
Name your achievements to date	
What are your leadership qualities and experience	
What are your personal strengths	
What are your personal development areas	
What motivates you	

SECTION 6: WE WOULD LIKE TO KNOW MORE ABOUT YOU					
Describe what you know of the career path you have chosen for yourself					

I declare that I am aware of the selection criteria and that I understand it.

I declare that the information supplied in this application is to the best of my knowledge true and correct.

I understand that any false information will automatically disqualify me.

Full name(s) and surname	
Signature	
Date	

You are required to submit copies of the following supporting documentation to bursaries@beka-schreder.co.za:

- 1. ID document (certified copy)
- 2. Latest Matric results, if currently in Matric (certified copy)
- 3. Matric certificate, if completed Matric (certified copy)
- 4. Proof of acceptance to study at an accredited tertiary institution
- 5. Motivation letter in support of bursary application
- 6. Proof of household income
  - 6.1. Certified copies of parent's payslips
  - 6.2. If parent/s is self-employed a copy of the latest audited financial statements or an affidavit declaring monthly income

These documents are compulsory, if any item is missing, your application will be disregarded.

For any queries related to this bursary programme, please contact BEKA Schréder (Pty) Ltd directly: Tel: 011 238 0085 – Training Department

Please note that your application will be verified within 3 weeks from date of application and only accepted applicants will be contacted.