

## APPLICATION FOR BURSARY

**Important:**

1. Please print clearly when completing this application form.
2. Mark appropriate blocks with an "X".
3. Failure to complete this application form accurately will prejudice the applicant's chances of obtaining a bursary.
4. A Commissioner of Oaths must certify all copies of certificates as true copies.
5. Certified ID copy, matric certificate and the latest qualification (where applicable) must be attached to this application.
6. The registration letter from the respective institution must be attached to this application
7. A written motivation must be attached to this application.
8. Submit the completed application forms to the Human Resources Department via email at [bursaries@rsr.org.za](mailto:bursaries@rsr.org.za). Subject heading MUST start with EXBUR2022 followed by your name and surname

ID number:

Full name(s): \_\_\_\_\_

Surname: \_\_\_\_\_

Title (Mr/Ms/Mrs): \_\_\_\_\_

Telephone number: \_\_\_\_\_

**Residential address:**

**Postal address:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Postal code:** \_\_\_\_\_

**Postal code:** \_\_\_\_\_

**EDUCATIONAL PARTICULARS OF THE APPLICANT**

School qualifications:

Name of school: \_\_\_\_\_

Matriculation date: \_\_\_\_\_

**TERTIARY EDUCATION:**

Degree or courses already completed/ obtained: \_\_\_\_\_

\_\_\_\_\_

Proposed course enrolled for: \_\_\_\_\_

Student number: \_\_\_\_\_

Subjects (present year of study): \_\_\_\_\_

\_\_\_\_\_

Minimum remaining duration of the intended study as prescribed by education institutions with effect from the following year: \_\_\_\_\_

\_\_\_\_\_

**PREVIOUS BURSARY PARTICULARS:**

Were you a recipient of any bursary previously (Yes/No): \_\_\_\_\_

If yes, which year: \_\_\_\_\_

Please furnish the details of the organisation where you received your bursary:

Name: \_\_\_\_\_

Nature of obligation: \_\_\_\_\_

Expected date of course completion: \_\_\_\_\_

**NEW BURSARY APPLICATION PARTICULARS**

*(Please note that this section is only completed by applicants that do not have financial assistance or have accepted bursary from any other institution for the same academic year they are applying for this bursary.)*

**Please complete this section fully to apply for this bursary**

Name of Degree/Diploma: \_\_\_\_\_

Major subjects: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and address of **SAQA accredited educational institution, at which you intend studying:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Write a brief motivation for doing the course :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total envisaged cost:**

Registration fees: R \_\_\_\_\_

Tuition fees: R \_\_\_\_\_

Books: R \_\_\_\_\_  
(Vouchers required if applicable)

Examination fees: R \_\_\_\_\_

Other: R \_\_\_\_\_

Total: R \_\_\_\_\_

What is the expected period for which you require the bursary (in years): \_\_\_\_\_

**DECLARATION**

**I \_\_\_\_\_ (full name and surname) acknowledge that this application is for a bursary and not a loan. I, therefore, declare that the above particulars are complete and correct.**

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

**Approved by Bursary Committee: (Yes/No)**

**Reasons for approval:** \_\_\_\_\_

\_\_\_\_\_

**Reasons for decline (if applicable):** \_\_\_\_\_

\_\_\_\_\_

**Bursary Committee Chairperson:** \_\_\_\_\_ **Dept:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Executive Manager Human Resources:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

