



# ALFRED NZO

DISTRICT MUNICIPALITY

## ANDM EXTERNAL BURSARY APPLICATION FORM FULL TIME STUDIES

### INSTRUCTIONS REGARDING THIS BURSARY FORM

- Use block letters to complete the Application form
- Give concise answers and where applicable mark with X
- Attach certified copies of the following:
  - Identity document
  - Grade 12 certificate or latest results for current grade 12 learners
  - Acceptance letter from recognized tertiary institution
  - Motivation letter (section 4 of the application form)
  - Proof of income
  - Proof of residence from ward Councilor

Where did you hear about Alfred Nzo Bursary?

Newspaper	Online <a href="http://www.zabursaries.co.za">www.zabursaries.co.za</a>	Friend	Facebook	Other (please specify)
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1.PARTICULARS OF APPLICANTS			
Surname:			
First Names:			
Identity number:			
Date of birth:			
Gender :	Female		Male
Race:	African	Coloured	Indian white
Disability:	Yes	No	If yes please specify the nature of disability
Cell phone no:		Alternative cell no:	
Home Tel no:		Fax no:	
Email Address:			
Postal Address:		Physical Address:	

2.PARTICULARS OF APPLICANTS			
<b>NB: please attach certified copies of latest grade 12 results, grade 12 certificate, and or tertiary results and academic record</b>			
What are doing this year:	Grade 12	Full-time tertiary studies	Gap year
Highest educational qualification obtained:			
Name of the school you are currently attending Or where you completed grade 12:			
Name of tertiary institution you are currently registered at if you have commenced your tertiary studies			

**Proposed programme for 2024**

First year students 2024	
First choice:	
Institution:	Campus:
Second choice	
Institution	Campus:
Second year students 2024	



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Name of the qualification:	
Institution:	Campus:
Student number:	
<b>Attach a certified copy of your latest results and academic record</b>	

### 3. DETAILS OF PARENTS/LEGAL GUARDIAN AND FAMILY (LIVING WITH YOU)

**Attach a proof of income: payslip, grant receipt etc.**

Surname : \_\_\_\_\_ First names: \_\_\_\_\_

Relationship:	Father	Mother	Legal Guardian	Other , specify
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Marital status:	Married	Divorced	Separated	Unmarried	Deceased	Widowed
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Employed :	yes	No	Pensioner	yes	no
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Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Relationship	Father	Mother	Legal Guardian	Other , specify
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Marital status:	Married	Divorced	Separated	Unmarried	Deceased	Widowed
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Employed :	yes	No	Pensioner	yes	no
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Surname: \_\_\_\_\_ First names: \_\_\_\_\_

Relationship	Father	Mother	Legal Guardian	Other , specify
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Marital status:	Married	Divorced	Separated	Unmarried	Deceased	Widowed
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Employed :	yes	No	Pensioner	yes	no
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#### **Other members of your family who are living at your home not mentioned above**

Name	Relationship (brother, grandparent)	category (child, student Adult	income ( per month)	type of income (wages, grant pension





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