

CONFIDENTIAL

APPLICATION FOR FINANCIAL ASSISTANCE FOR TERTIARY EDUCATION (Not a full bursary)

Important Information

1. Assistance available to **KNYSNA RESIDENTS ONLY**.
2. Assistance only for undergraduate studies – no post graduate applicants will be considered.
3. Application form to be fully completed. If not fully completed, application will not be considered.
4. Photocopy of applicant’s Identity Document to be attached to the application.
5. Passport photo of applicant to be attached in the space provided.
6. Sections 1 - 5 to be completed in own handwriting. Sections 6 & 7 to be completed by parent/guardian.

NAME OF APPLICANT	
WHAT DO YOU PLAN TO STUDY?	

New application
 Re-application

Attach photo here

RETURN APPLICATION TO:
 The Secretary
 Education Committee
 hgtom57@gmail.com

CLOSING DATE	15 NOVEMBER 2024
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SECTION 1: PERSONAL PARTICULARS			
SURNAME (Block letters)		NATIONALITY	
FIRST NAMES		GENDER	
DATE OF BIRTH		AGE	
ID NUMBER		HOME LANGUAGE	
		MARITAL STATUS	
RESIDENTIAL ADDRESS			
EMAIL (PLEASE PRINT)			
CELL NUMBER			
INTERESTS			
SPORTS			
HOBBIES			
OTHER INTERESTS			
ADDITIONAL INFORMATION			
HOW LONG HAVE YOU & YOUR FAMILY LIVED IN KNYSNA?			
HOW MANY BROTHERS DO YOU HAVE?			
WHAT DO THEY DO?	<input type="checkbox"/> School	<input type="checkbox"/> Studying	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed
HOW MANY SISTERS DO YOU HAVE?			
WHAT DO THEY DO?	<input type="checkbox"/> School	<input type="checkbox"/> Studying	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed
DO YOU SUPPORT ANY DEPENDENTS? GIVE DETAILS			
EMPLOYMENT EXPERIENCE			
HAVE YOU EVER BEEN EMPLOYED?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
GIVE DETAILS	1	2	3
NAME OF EMPLOYER			
NATURE OF WORK			
DATES OF EMPLOYMENT			

SECTION 2:		EDUCATIONAL INFORMATION	
HIGH SCHOOL EDUCATION (Not required if one full year of tertiary study has been completed)			
LAST SCHOOL ATTENDED		TOWN	
SUBJECTS	FINAL % MARK GRADE 11	FINAL % MARK GRADE 12 (or mid-year)	
YEAR NATIONAL SENIOR CERTIFICATE OBTAINED		NOTE: Please attach a copy of your latest academic results	
LEADERSHIP – Mark correct box with an X and give details			
WERE YOU A PREFECT?	Yes	No	
DID YOU CAPTAIN A SPORTS TEAM?	Yes	No	What?
WERE YOU PART OF A CLUB/TEAM?	Yes	No	What?
DID YOU LEAD ANY OTHER CLUB/TEAM?	Yes	No	What?

ANY FURTHER INFORMATION YOU WISH TO SUBMIT

SECTION 3:		EDUCATIONAL INFORMATION		
TERTIARY EDUCATION (Complete if at present attending a University/College)				
STUDY COURSE			UNIVERSITY/COLLEGE	
MAJOR SUBJECTS	2023 % MARKS	2024 % MARKS (mid-year)		NOTE: New applications Please attach a copy of your latest academic results NOTE: Re-applications Please attach a copy of your mid-year results

SECTION 4:		PROPOSED FIELD OF STUDY					
STUDY COURSE			UNIVERSITY/COLLEGE				
DURATION OF COURSE IN YEARS	1	2	3	4	5	Mark correct box with X	
INTENDED YEAR OF STUDY FOR 20254	1	2	3	4	5	Mark correct box with X	
MAJOR SUBJECTS							

SECTION 5:		EXPECTED COSTS PER YEAR				
DURATION OF COURSE IN YEARS	1	2	3	4	5	
ACADEMIC FEES						
RESIDENCE FEES						
OTHER FINANCIAL ASSISTANCE						
HAVE YOU APPLIED FOR ANY OTHER FINANCIAL ASSISTANCE?			YES	NO	Mark correct box with X	
WAS THE APPLICATION SUCCESSFUL?			YES	NO	Mark correct box with X	
NAME OF ORGANISATION APPLIED TO		AMOUNT		TERMS OF REPAYMENT		

I hereby certify that I have completed the form myself and that all information is correct	
DATE _____	APPLICANT'S SIGNATURE _____

SECTION 6:		PARTICULARS OF PARENT / GUARDIAN (Section 6 to be completed by parent or guardian)			
FULL NAME					
ID NUMBER					
HOME ADDRESS					
TELEPHONE	CELL		WORK		
EMAIL (PLEASE PRINT)					
RELATIONSHIP TO APPLICANT			NATIONALITY		
OCCUPATION	FATHER		MOTHER	GUARDIAN	
NAME & CONTACT DETAILS OF CURRENT EMPLOYER – FATHER					
NAME & CONTACT DETAILS OF CURRENT EMPLOYER – MOTHER					
NAME & CONTACT DETAILS OF CURRENT EMPLOYER – GUARDIAN					

SECTION 7:		INCOME STATEMENT (Section 7 to be completed by parent or guardian)	
<p>NOTE: A full statement of all income, both formal and informal and a copy of the latest tax return of both parents (if both are employed) and guardian to be submitted. If not submitted, application will be rejected.</p>			
ANNUAL INCOME (R/YEAR) From all sources	FATHER		
	MOTHER		
	GUARDIAN		
ARE YOU ABLE TO ASSIST THE APPLICANT FINANCIALLY?			

ANY FURTHER FINANCIAL INFORMATION YOU WISH TO SUBMIT

I hereby certify that all the above information is correct and is a full reflection of family income

DATE _____ **SIGNATURE OF PARENT/GUARDIAN** _____