

KWAZULU-NATAL DEPARTMENT OF PUBLIC WORKS



BURSARY APPLICATION FORM

**PROSPECTIVE EXTERNAL BURSARY
HOLDERS**

FULL TIME STUDIES

<p>Please Print when completing this form.</p> <p>Mark appropriate blocks with an "X"</p> <p>Failure to complete this application form fully and correctly may prejudice the applicant's chances of obtaining a bursary</p>	<p>Submit the completed application form, and the relevant attachments, to the Office of Human Resource Development Component in your area OR post to Private Bag X9142, Pietermaritzburg, 3200</p>
<p>PERSONAL PARTICULARS</p>	
<p>FULL NAMES: _____ WELL KNOWN AS: _____</p>	
<p>SURNAME: _____</p>	
<p>IDENTITY NUMBER: _____</p>	<p>DATE OF BIRTH: _____</p>
<p>POSTAL ADDRESS: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____ CODE: _____</p>	<p>(This shaded portion must be completed by applicants who are residing at Rural Areas ONLY)</p> <p>NAME OF WARD COUNCILLOR: _____</p> <p>_____</p> <p>OFFICE ADDRESS OF WARD COUNCILLOR: _____</p> <p>_____</p> <p>_____</p> <p>_____ CODE: _____</p> <p>OFFICE TELEPHONE NUMBER: _____</p> <p>CELLPHONE NUMBER: _____</p> <p>FAX NUMBER: _____</p> <p>NAME OF INKOSI OR INDUNA _____</p> <p>_____</p> <p>NAME OF TRIBAL COURT: _____</p> <p>ADDRESS OF TRIBAL COURT: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____ CODE: _____</p>
<p>PHYSICAL ADDRESS: _____</p> <p>_____</p> <p>_____</p> <p>_____ CODE: _____</p>	
<p>PROVINCE: _____</p>	
<p>DISTRICT MUNICIPALITY: _____</p>	
<p>LOCAL MUNICIPALITY & WARD NUMBER _____</p>	
<p>AREA: _____</p>	
<p>RURAL AREA / URBAN AREA: _____</p>	
<p>HOME TELEPHONE NUMBER: _____</p>	
<p>CELLPHONE NUMBER: _____</p>	
<p>ALTERNATE NUMBER: _____</p>	
<p>FAX NUMBER: _____</p>	
<p>Email Address: _____</p>	<p>_____</p>

NATIONALITY: South African/ _____	Marital status: Single/Married/Divorced/Widowed
GENDER: Male/Female	DISABILITY: YES/NO _____
RACE: Black/Coloured/Indian/ White	Are you currently employed? YES/NO If yes, please elaborate_____
Have you ever been convicted of a criminal offence, dismissed from employment or requested to resign? YES/NO If the answer is yes please furnish full details on a separate sheet of paper.	Did you consult a vocational counselor regarding your choice of study? YES/NO
Have you previously received a Public Service Bursary? YES/NO If yes – From which year until when ?_____ Institution:_____	
Were you previously a recipient of another bursary? YES/NO If the answer is yes please indicate the name of the authority:	
Nature of obligations: _____	
Have all the obligations been fulfilled? YES/NO	
Name of the degree or diploma which you are applying for	
What will the major subjects be for the degree or diploma?	
Number of years you intend studying for	
Name of tertiary institution you intend studying	

QUALIFICATIONS

Highest grade passed:

Name of school attended:

Town/city:

UNIVERSITY AND/OR OTHER POST SCHOOL TRAINING/STUDIES

Are you presently enrolled at a tertiary institution?

YES/NO

Name of University

Student Number:

List the subjects passed thus far:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Address of University

Current year of study: _____

Prescribed period of study: _____

Name of Degree

What is the remaining duration of your current studies as prescribed by the tertiary institution

Please indicate the year you started studying for the current course of studies:

List the subjects that still need to be completed to obtain the relevant qualification:

Have you ever failed any year of study?
YES/NO

	Which year?
<p>Have you rewritten the examination for the subjects failed? If yes please indicate the date of the examination:</p> <p>_____</p> <p>_____</p>	<p>List those subjects:</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p>
<p>Occupation of father/mother/guardian:</p> <p>_____</p>	
<p>Please indicate the annual gross income of your legal guardian or parents should you be dependent on them during the course of your intended studies (please tick the relevant option):</p> <p>LESS THAN R19 000 R19 000 – R90 000 OVER R90 000</p>	
<p>Full name of father/mother /legal guardian (if applicable):</p> <p>_____</p>	
<p>Contact details of father/mother/legal guardian:</p> <p>Tel Number: _____ Cell phone number: _____</p>	
<p>Physical Address of father/mother/legal guardian:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>Employer of father/mother/ legal guardian:</p> <p>_____</p> <p>_____</p>	
<p>Address of employer:</p> <p>_____</p> <p>_____</p>	
<p>Work Telephone Number:</p> <p>_____</p>	
<p>_____</p>	

DECLARATION

I understand that this bursary is not a loan but I have to serve the department for number of years that the Department has assisted me with bursary and I declare that the above given particulars are correct and I (the applicant) intend making my services available to the **Department of Public Works in KwaZulu-Natal failing to do that I will be in Breach of Contract**

SIGNATURE OF APPLICANT

DATE

WITNESS

DATE

WITNESS

DATE**SIGNATURE OF FATHER/MOTHER /LEGAL
GUARDIAN** _____**DATE:** _____

WITNESS

DATE

WITNESS

DATE

RECOMMENDATION HEAD OFFICE COMMITTEE

NAME OF CHAIRPERSON

SIGNATURE

DATE: _____

RECOMMENDATION DEPARTMENTAL HRD COMMITTEE

NAME OF CHAIRPERSON

SIGNATURE

DATE: _____

RECOMMENDATION BY PROVINCIAL BURSARY COMMITTEE

NAME OF CHAIRPERSON

SIGNATURE

DATE: _____

APPROVED/NOT APPROVED/VARIED

NAME OF HEAD OF DEPARTMENT

SIGNATURE

DATE: _____

REQUIREMENTS

Please provide the following with the Bursary application form:

- 1) A certified copy of an official statement of results as well as official proof of matriculation exemption if it is a requirement for the course of study you intend following. If the examination still needs to be written, attach a certified copy of the statement of symbols for the examination.**
- 2) A certified copy of the official study record showing marks, symbols, percentages obtained in all examinations (including the matriculation examination) written, as well as the half year result in respect of the present year of study**
- 3) Certified copy of identity document**
- 4) Copy of the admission requirements and number of modules/subjects from the academic institution for the intended course of study**
- 5) Copy of the curriculum (indicating the number of years of study) from the academic institution for the intended course of study**
- 6) Affidavit indicating that you are unemployed**
- 7) Study plan indicating how the course will be completed over the stipulated contract period**
- 8) Printout from the academic institution of the tuition fees, prescribed books, and all other fees that will be required**
- 9)**