



2018 BURSARY APPLICATION FORM

Important: Please note incomplete applications will not be processed.
Closing date strictly 11 March 2018.

Surname:	
First names:	
Gender:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Race:	
Intended field of study:	
Major subjects:	
University/Technikon:	
Year of Study (e.g. year 1 of 4)	
Present postal address:	
	Postal Code:
Permanent Postal Address:	
	Postal Code:
Permanent Home Address:	
	Residential Code:
Tel No:	Cell No:

CONFIDENTIAL

1 PERSONAL INFORMATION

1.1 Date of Birth	Place of Birth
1.2 Disabled If yes, provide details as below:	Yes <input type="checkbox"/> No <input type="checkbox"/>
1.3 Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/>
1.4 Nationality	
1.5 Identity number	
1.6 Home language	

2 CITIZENSHIP STATUS

2.1 Period of residence in RSA	
2.2 Registration as citizen under consideration	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.3 South African citizen	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.4 Immigration permit number	

3 HIGH SCHOOL EDUCATION

3.1 School Name:	Province:	
3.2 Highest standard passed	Year:	
Subject	Level (Higher/Standard Grade)	Percentage/Symbol* Grade 12

4 TERTIARY EDUCATION

University/college/other	Field of study	Study year	Course/Subject	Percentage/ Symbol*

* Please attach a copy of your academic record/transcripts of results with the University letter head.

5 CRIMINAL RECORD

5.1 Have you ever been convicted of criminal offence? Yes No

If yes, provide details

6 INTERESTS AND HOBBIES

6.1 Outstanding achievements

6.2 Previous/Current Leadership Responsibilities:

6.3 Hobbies:

7 DISCLOSURE OF RELATIVE IN TCTA

Do you have a family member or relative working for TCTA? Yes No

If yes, provide details as below:

7.1 Name

7.2 Relationship

7.3 Position

8 PARTICULARS OF PARENT/ GUARDIAN

8.1 Name	
8.2 Relationship	
8.3 Occupation	
8.4 Employer	
8.5 Annual Income:	
8.6 Business address	
	Postal Code
8.7 Business Tel:	Tel No:

9 GENERAL

9.1 Health Condition of	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
9.2 Do you have a valid driver's licence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
9.3 Have you applied for internship elsewhere?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, provide details			
9.4 How did you did you know about the bursary?			
Social Media <input type="checkbox"/>		Newspapers <input type="checkbox"/>	
Personal Referrals <input type="checkbox"/>		University Adverts <input type="checkbox"/>	
Other (specify)			

I declare that the above particulars are true and correct and understand that any false or incomplete**Information may constitute grounds for the application to be unsuccessful.**

Signature of applicant	Date
Signature of parent or guardian if applicant is minor	Date