



**DEPARTMENT OF CORRECTIONAL SERVICES**  
**BURSARY OPPORTUNITY**

As part of the Recruitment and Retention Strategy of the Department of Correctional Services, in order to attract high quality people with the required competencies to join the Department and to meet its future personnel needs, applications for bursaries from unemployed South African citizens are invited for the **2015** academic year in the following fields of study:

QUALIFICATION	FIELD
Artisans: Diploma	<ul style="list-style-type: none"> <li>• Bricklaying,</li> <li>• Welding</li> <li>• Painting</li> <li>• Electrical</li> </ul>
National Diploma / Degree Honours	• Agricultural Technicians
National Diploma / Degree	• Primary Health Care
Degree	• Pharmacy
Masters	• Clinical or Counseling Psychology
Medicine	• MBCHB
National Diploma / Degree	• Information Technology
National Diploma / Degree	• Food Services Management

**Applicants must:** Be accepted at an accredited South African tertiary institution; be prepared to enter into an agreement with the Department of Correctional Services, do counter-service upon completion of qualification anywhere in the department where there is a need; if successful, be prepared to pay the minimum registration fees (refundable at a later stage) as required by tertiary institutions that do not accept the Department's sponsorship letter.

Applicants must complete an Application Form, **Annexure G5 and Course Fee Outline** which are obtainable from the Department's website: [www.dcs.gov.za](http://www.dcs.gov.za) or at any regional office of Correctional Services on the addresses below:

Gauteng	Limpopo/ Mpumalanga/ North-West	Western Cape	Northern Cape/Free State
Ms. Sbongile Mkhuzangwe Tel 012- 420 0190 Private Bag x393 Pretoria, 0001  <u><b>Physical Address</b></u> Broll Building 1077, Corner Festival and Arcadia street Hatfield	Mr. Eddie Nhlengethwa Tel 012- 3062100/2026 Private Bag x 142 Pretoria, 0001  <u><b>Physical Address</b></u> Masada Building C/n Proes and Paul Kruger Street	Mr. Ngcanga FD Tel (021) 550 6068/78 Switchboard: 021- 3506000 Private Bag x 1 Edgemoed, 7407  <u><b>Physical Address</b></u> Breede River Street Montagu Drive Monte Vista, 7460	Mr. Charles Matsapola Tel (051) 404 0266 Private Bag x 20530 Bloemfontein, 9300  <u><b>Physical Address</b></u> Zastron Street 103 Agrimed Building Bloemfontein

Eastern Cape	Kwa-Zulu/Natal
Mr. Twani SV Tel (043)706 7803/7840 Private Bag x 9013 East London, 5200  <u>Physical Address</u> Ocean View Terrace East Block Moore street	Ms. Rajashree Moodley Tel (033) 355 7303/ 7359 Private Bag x 9126 Pietermaritzburg, 3200  <u>Physical Address</u> Eugene Marais Road Napierville, PMB

• Please note the following:

- Application forms will under no circumstances be posted or faxed to the applicant.
- Certification of copies should not be older than three months.
- Complete application forms must be hand-delivered/posted (**not registered mail please**) to the above-mentioned offices no later than the (two weeks from the date of advertisement) **by 15:45**.

• Incomplete, faxed and emailed application forms will not be considered.

• Correspondence will only be limited to successful candidates.



TMI MOKOENA

CDC HUMAN RESOURCES

DATE: 12/08/04

**DEPARTMENT OF CORRECTIONAL SERVICES  
EXTERNAL BURSARY APPLICATION FORM**



**This form will be considered as incomplete and will be eliminated if the following documents are not attached to this application:**

- Certified copy of ID
- Certified copy of matric
- Certified copy of highest qualification
- Certified copy of academic record if already enrolled for the qualification
- Course Curriculum / Prospectus
- Course fee outline
- Acceptance letter or proof that the applicant has applied for acceptance at tertiary institution (tuition and accommodation)

**A. PERSONAL DETAILS:**

1. Identity number: ..... 2. Date of birth: .....
3. Title: ..... 4. Gender: M      F
5. Surname ..... 6. Race: Black   White   Coloured   Indian
7. Full names: .....
8. Disabled/Not disabled: If disabled, state the nature of disability.....
9. Physical Address:
   
.....
   
..... Postal Code .....
10. Postal Address:
   
.....
   
..... Postal Code .....
11. Region/(Province) : .....
12. Telephone no: .....
   
Cell phone no: ..... : E-mail address:.....
13. Next of kin:
  
Name: ..... Relation: .....
   
Contact telephone numbers (H): .....
   
(Cell) .....
   
Residential Address.....
   
.....
14. If employed, name and address of employer: .....
   
.....

**B. COURSE DETAILS**

1. Which qualification is this application for? .....
2. At which education institution are you enrolled /going to enroll? .....
- 2.1 Do you comply with the admission requirements: YES / NO  
( If full-time studies please attach acceptance letter or proof of application for acceptance for both accommodation and tuition)
3. Minimum period (if not commenced with studies yet) /remaining period of studies? .....
4. In which academic year are you now? .....  
(attach results of previous years)
5. Type of tuition (Proof from the tertiary institution, confirming that the qualification/course is only offered on a full-time basis, needs to be attached)

Part-time

☐

Full-time

☐

6. Which subjects will be your major/s?

.....  
.....

7. What is your highest qualification at present?.....  
(Attach certified copy)

8. Are / were you a recipient of a bursary YES / NO  
If yes, please complete:

- a) Study field.....
- b) Bursary granted by: .....
- c) Bursary period: .....
- d) Nature of obligations: .....
- e) Have you fulfilled the obligations: .....

9. Give your motivation why you want to do this course, what is the direct link of this qualification/course of study to your personal development plan?

.....  
.....

**C. DECLARATION BY APPLICANT**

I .....ID NO:.....

HEREBY DECLARE THAT THE INFORMATION GIVEN BY ME ABOVE IS TRUE AND BINDING TO MY CONSCIENCE.

.....	.....	.....
Name in Bold	Signature	Date

**D. REFERENCES:**

Reference 1:

Full name: ..... Id Nr: .....

Relationship: .....

Contact Details:

Work: ..... Home: ..... Cell: .....

E-mail: .....

Reference 2:

Full name: ..... Id Nr: .....

Relationship: .....

Contact Details:

Work: ..... Home: ..... Cell: .....

E-mail: .....

**RECOMMENDATION: REGIONAL HEAD: HUMAN RESOURCES****(Indicate relevance of course and the future need of the qualification)**

.....

.....

.....

Name in bold

Designation

Signature

Date

**FOR OFFICE USE ONLY****(To be completed by Regional Coordinator: HRD)**

	NAME IN FULL	PERSAL NUMBER	DATE
RECEIVED BY			
CHECKED BY			

**RECOMMENDATION: DIRECTOR POLICY AND EXTERNAL TRAINING****(All relevant documentation attached and in order)**

.....

.....

.....

Name in bold

Designation

Signature

Date

**BURSARY APPROVED/ NOT APPROVED: DC: HUMAN RESOURCE DEVELOPMENT**

.....

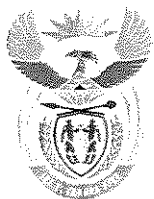
.....

Name in bold

Designation

Signature

Date



# correctional services

Department:  
Correctional Services  
REPUBLIC OF SOUTH AFRICA

## COURSE FEE OUTLINE BURSARY APPLICATIONS: EXTERNAL

NAME: \_\_\_\_\_

ID NO: \_\_\_\_\_

QUALIFICATION: \_\_\_\_\_

TERTIARY INSTITUTION: \_\_\_\_\_

ACADEMIC YEAR	SUBJECTS I AM GOING TO ENROLL FOR	SUBJECT FEES	ANNUAL ACCOMMODATION FEES (only applicable if applying for a full-time bursary)	ANNUAL MEAL FEES (only applicable if applying for a full-time bursary)
2015	Indicate fees as it is currently been advertised by the tertiary institution			
	Sub Total	R	R	R
	Plus 10% increase on current fee	R	R	R
	Grand total 2013	R		
2016				
	Sub Total	R	R	R
	Plus 20% increase on current fee	R	R	R
	Grand total 2014	R		

**COURSE FEE OUTLINE BURSARY APPLICATIONS: EXTERNAL**

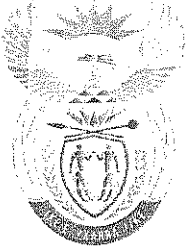
<b>2017</b>				
	<b>Total</b>	<b>R</b>	<b>R</b>	<b>R</b>
	<b>Plus 30% increase on current fee</b>	<b>R</b>	<b>R</b>	<b>R</b>
	<b>Grand total 2015</b>	<b>R</b>		
<b>2018</b>				
	<b>Total</b>	<b>R</b>	<b>R</b>	<b>R</b>
	<b>Plus 30% increase on current fee</b>	<b>R</b>	<b>R</b>	<b>R</b>
	<b>Grand total 2016</b>	<b>R</b>		



# EXAMPLE

ANNEXURE G5

## DEPARTMENT OF CORRECTIONAL SERVICES EXTERNAL BURSARY APPLICATION FORM



This form will be considered as incomplete and will be eliminated if the following documents are not attached to this application:

- Certified copy of ID
- Certified copy of matric
- Certified copy of highest qualification
- Certified copy of academic record if already enrolled for the qualification
- Course Curriculum / Prospectus
- Course fee outline
- Acceptance letter or proof that the applicant has applied for acceptance at tertiary institution (tuition and accommodation)

### A. PERSONAL DETAILS:

1. Identity number: 2004180102084 2. Date of birth: 18-APRIL-2000
3. Title: MISS 4. Gender: M ☐ F ☒
5. Surname: KGOPOTSO 6. Race: ☒ Black ☐ White ☐ Coloured ☐ Indian
7. Full names: MOSADI SELAELO
8. ☒ Disabled ☐ Not disabled: If disabled, state the nature of disability PROOF OF DISABILITY ATTACHED
9. Physical Address:  
111 THABO MBHEKI STREET  
POLOKWANE Postal Code 0152
10. Postal Address:  
P. O BOX 1010  
POLOKWANE Postal Code 0152
11. Region/(Province): LIMPOPO
12. Telephone no: 0720101010  
Cell phone no: 0820101010 E-mail address: mosadis@gmail.com
13. Next of kin:  
Name: NOMNTHO MJI Relation: SISTER  
Contact telephone numbers (H): 084 0101010  
(Cell) 013 0101010  
Residential Address: PRIVATE BAG X 1010  
CULLINAN 0010
14. If employed, name and address of employer: MAZULU CASH  
E. CARRY, P. O BOX 1001 CULLINAN 0010

PLEASE ENSURE THAT THE QUALIFICATION YOU ARE APPLYING FOR IS ON THE ADVERT.

B. COURSE DETAILS

1. Which qualification is this application for? DEGREE: SOCIAL WORK.
2. At which education institution are you enrolled /going to enroll? UNIVERSITY OF PRETORIA
- 2.1 Do you comply with the admission requirements: (YES) / NO  
( If full-time studies please attach acceptance letter or proof of application for acceptance for both accommodation and tuition)
3. Minimum period (if not commenced with studies yet) /remaining period of studies? THREE YEARS
4. In which academic year are you now? FIRST YEAR  
(attach results of previous years)
5. Type of tuition (Proof from the tertiary institution, confirming that the qualification/course is only offered on a full-time basis, needs to be attached)  
Part-time ☐ Full-time ☒
6. Which subjects will be your major/s?  
BASIC PSYCHOLOGY INTRODUCTION TO DEVELOPMENT STUDIES  
MARRIAGE GUIDANCE COUNSELLING: SEXUAL TRAUMA
7. What is your highest qualification at present? MATRIC / GRADE 12  
(Attach certified copy)
8. Are / were you a recipient of a bursary YES (NO)  
If yes, please complete:
  - a) Study field: .....
  - b) Bursary granted by: .....
  - c) Bursary period: .....
  - d) Nature of obligations: .....
  - e) Have you fulfilled the obligations: .....
9. Give your motivation why you want to do this course, what is the direct link of this qualification/course of study to your personal development plan?  
I AM A HARDWORKING PERSON WHO IS DEDICATED TO MY STUDIES. I AM CURRENTLY IN MY FIRST YEAR STUDING BA: SOCIAL WORK. GETTING HIS BURSARY WILL ASSIST ME IN ACHIEVING MY GOAL OF BECOMING SOCIAL WORKER IN ORDER TO ASSIST PEOPLE ESPECIALLY IN THE RURAL AREAS WHERE THERE IS A NEED.

**C. DECLARATION BY APPLICANT**

I KGOPOTSO MOSADI SELAELO ID NO: 2004180102084

HEREBY DECLARE THAT THE INFORMATION GIVEN BY ME ABOVE IS TRUE AND BINDING TO MY CONSCIENCE.

M.S. KGOPOTSO

Signature

2014.07.11

Date

Name in Bold

**D. REFERENCES:**

Reference 1:

Full name: MAKULE MPHOTO Id Nr: 7101010804084

Relationship: LECTURE

Contact Details:

Work: (012) 307 2078 Home: (012) 307 2380 Cell: 081 001 089

E-mail: mphom@yahoo.com

Reference 2:

Full name: VAN DER WALT PETER Id Nr: 6901010408084

Relationship: PASTOR

Contact Details:

Work: (012) 307 2570 Home: (012) 307 2637 Cell: 061 000 1089

E-mail: peter.v32@gmail.com

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.....

.....

.....

Date \_\_\_\_\_

(To be completed by Regional Coordinator: HRD)

(To be completed by Regional Coordinator: HRD)			
	NAME IN FULL	PERSAL NUMBER	DATE
RECEIVED BY			
CHECKED BY			

[illegible]

Date \_\_\_\_\_

Date \_\_\_\_\_