

AFRICAN SCHOLARS' FUND

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BURSARY APPLICATION FORM : PUBLIC FURTHER EDUCATION & TRAINING COLLEGES

PLEASE NOTE:

- ◆ Closing dates: 31 Oct for 1st trimester/semester, 31 March for the 2nd trimester, 31 May for 2nd semester, 31 July for 3rd trimester.
- ◆ Incomplete or late applications will **not** be considered. Please post by standard post. **Do not fax applications.**
- ◆ Bursaries are offered for full-time courses only at FET colleges in N2–N6 in trade courses & practicals and N4–N6 in business courses.
- ◆ Applicants must not be older than 25 years of age and reside in the **Eastern, Northern Cape and southern part North West Provinces only.**
- ◆ If already at college, a minimum of 50% in all tests and exams is required.
- ◆ Bursaries will not be granted to students who have other bursaries. This will be checked with all bursary organisations and colleges.
- ◆ Bursaries do not cover accommodation – if you live far from college explain where you would stay and how you would pay for it.

PLEASE TICK THAT THE FOLLOWING HAVE BEEN INCLUDED WITH YOUR APPLICATION:

- ☐ A certified copy of your latest high school certificate or report.
- ☐ Copies of *all* your previous college exam results, if applicable. Send actual marks, not just certificates.
- ☐ If at college, a printout of current CLASS TEST results MUST be included or the application will be disregarded.
- ☐ Payslips, pension receipts or other proof of income.
- ☐ A stamped, self-addressed envelope.
- ☐ A letter in your own handwriting to motivate your application and explain your family circumstances.

PERSONAL AND SCHOOL DETAILS

SURNAME _____ ID NUMBER _____

FIRST NAMES _____ SEX : Male / Female

HOME ADDRESS _____

_____ POSTAL CODE _____

TEL NO : _____ CELL NO : _____

ARE YOU AT HIGH SCHOOL NOW? _____ IF YES, WHAT GRADE ARE YOU IN? _____

IF NOT, WHAT IS YOUR HIGHEST GRADE PASSED? _____ IN WHICH YEAR? _____

NAME OF LAST HIGH SCHOOL ATTENDED _____

EXPLAIN WHAT YOU DID IN ANY YEARS AFTER SCHOOL BUT NOT AT COLLEGE _____

DETAILS OF OTHER BURSARIES APPLIED FOR _____

TO BE SWORN AND SIGNED IN THE PRESENCE OF A COMMISSIONER OF OATHS:

I have not been awarded a bursary by any other organisation.

I declare that the information I have given on this form is true and correct.

SIGNATURE OF STUDENT _____ DATE _____

SIGNATURE OF COMMISSIONER OF OATHS _____

OFFICIAL STAMP OF COMMISSIONER OF OATHS

FAMILY DETAILS TO BE COMPLETED AND SIGNED BY A SOCIAL WORKER

INCOME (Payslips required)

| BREADWINNERS | RELATIONSHIP TO APPLICANT | TYPE OF WORK | EARNINGS / MONTH |
|--------------|------------------------------|--------------|------------------|
| 1 _____ | _____ | _____ | R _____ |
| 2 _____ | _____ | _____ | R _____ |

In single-parent families, give details of whereabouts and work of other parent and amount of maintenance paid, if any.

DETAILS OF DEPENDANTS, NUMBER OF CHILDREN, THEIR AGES AND WHETHER SCHOOLGOING

NAME OF SOCIAL WORKER _____ SIGNATURE _____

TELEPHONE NUMBER _____ DATE _____

OFFICIAL STAMP:

COLLEGE INFORMATION

IF YOU ARE AT COLLEGE NOW, STATE WHICH COLLEGE AND CAMPUS _____

PRESENT COURSE AND LEVEL (not the one you are applying for below) _____

TO BE COMPLETED BY THE COLLEGE YOU WILL BE ATTENDING

Give details only for the next trimester/semester N-level course, not for a whole year unless the course is a whole-year course.

NAME OF COLLEGE _____ NAME OF CAMPUS _____

COURSE AND LEVEL _____

THIS COURSE BEGINS ON _____ AND ENDS ON _____

TUITION FEES : R _____

REGISTRATION FEES: R _____

TOTAL: R _____

I CONFIRM THAT THE APPLICANT IS ELIGIBLE TO BE ENROLLED IN THIS COURSE

PRINCIPAL / HEAD OF DIVISION (NAME) _____ SIGNATURE _____

COMMENTS IF NECESSARY _____

DATE _____ COLLEGE STAMP: