

## ANDM EXTERNAL BURSARY APPLICATION FORM FULL TIME STUDIES

## INSTRUCTIONS REGARDING THIS BURSARY FORM

- > Use block letters to complete the Application form
- Give concise answers and where applicable mark with X Attach certified copies of the following:
- > Identity document
- > Grade 12 certificate or latest results for current grade 12 leaners
- > Acceptance letter from recognized tertiary institution
- Motivation letter(section 4 of the application form)
- > Proof of income
- > Proof of residence from ward Councilor

Where did you hear about Alfred Nzo Bursary?

Newspaper	Online	Friend	Facebook	Other (please
				specify)



1.PARTICULARS OF	<b>APPLICA</b>	NTS						
Surname:								
First Names:								
Identity number:								
Date of birth:								
Gender:	Female Male							
Race:	African Coloured Indian white						white	
Disability:	Yes	Yes No If yes please specify the nature of disability						
Cell phone no:	Cell phone no: Alternative cell no:							
Home Tel no:			Fa	x no:				
Email Address:								
Postal Address:				ysical Ad	ddress:			
0 D 4 D T 10 1 11 4 D 0 0 E	4 D D L L O A	NITO.						
2.PARTICULARS OF				10	•	1 10 110		
NB: please attach cert		of lates	st grade	e 12 resu	its, gra	de 12 certific	cate, and or tertiary	
what are doing this	Grade 1	2		Full-tim	o tortic	n, C	'on woor	
year:	Grade i	2		studies		ary G	ap year	
Highest educational q	ualification	obtaine	.d.	Studies	)			
Name of the school yo								
Or where you complete			. <del>c</del> nung					
Name of tertiary institu			ntly red	nistarad :	at if vo	u have com	menced your	
tertiary studies	ation you a	ic cuire	illy ict	jistorou t	at ii yo	d have com	incheca your	
Proposed programm	e for 2024	l						
r roposca programm	10 101 202	•						
First year students 20	24							
First choice:								
Institution:			С	ampus:				
Second choice								
Institution				Campus:				
Second year students	2024		I	<u> </u>				
-							'	



Name of the qualification:	
Institution:	Campus:
Student number:	
Attach a certified copy of your latest results a	and academic record

3. DETAILS OF	<b>PARENTS</b>	S/LEG	AL G	UARDIA	N AND	<b>FAMILY</b>	(LIV	ING W	ITH Y	OU)
Attach a proof of income: payslip, grant receipt etc.										
Surname: First names:										
Relationship:	Father		Mother		Legal Guardian				Other , specify	
Marital status:	Married	ed Divorced		Separated		Unmarried Dece		Dece	ased	Widowed
Employed:	ves No		Pens		ioner yes		no			
Surname:										
Relationship	Father			Mother		Legal G	uard	lian		Other, specify
Marital status:	Married	Divo	rced	Separated		Unmarried De		Dece	ased	Widowed
Employed:	yes	s No		Pens		sioner	ioner yes			no
Surname: First names:										
Relationship	Father	-ather		Mother		Legal Guardian			Other , specify	
Marital status:	Married	Divo	rced	Separated Unmarried Deceased			Widowed			
Employed:	yes		No		Pens	ioner yes		no		
Other members of your family who are living at your home not mentioned above										
Name	Relations	hip	cate	ategory (child, income type		type	of income			
	(brother,	•	stud	dent Adul	ent Adult		( per month)		(wages, grant	
	grandpar	ent)							pension	



4. MOTIVATION WHY YOU MUST BE CONSIDERED FOR ANDM BURSARY(use additional pages if necessary)
additional pages if ficoessally)
DECLARATION
I hereby declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information supplied could lead
to my application being disqualified. Ref: 3/3/1 Applicants signature: Date
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