
 <p><b>higher education &amp; training</b> Department: Higher Education and Training REPUBLIC OF SOUTH AFRICA</p>	2016	For use by the College Central Office <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	 <p><b>NSFAS</b> National Student Financial Aid Scheme</p>
<p><b>TECHNICAL AND VOCATIONAL EDUCATION AND TRAINING (TVET) COLLEGE BURSARY APPLICATION FORM FOR THE REPORT 191 PROGRAMMES</b></p>			

**Important Note**

Attach a certified copy of your South African Identity Document.  
Please use black ink when completing the Bursary Application Form.  
Use of correcting fluids, (e.g. Tippex) will invalidate this Bursary Application Form.  
Any alterations must be countersigned by the Student and the College.  
This Bursary Application form is only for the Report 191 Programmes. Applicants must comply with entry requirements as indicated in the National Education Policy Report 191, Part 1 and Part 2.

TVET COLLEGE STAMP

**A. PARTICULARS OF STUDENT**

Student Number: <input type="text"/>	College Name: _____								
Identity Number: <input type="text"/>	Campus: _____								
Surname: _____	Title: _____								
Maiden Surname, if applicable: _____									
First Names (as reflected on ID): _____									
Date of Birth: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>M</td><td>M</td><td>D</td><td>D</td></tr></table>	Y	Y	Y	Y	M	M	D	D	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Y	Y	Y	Y	M	M	D	D		
Disability: <input type="checkbox"/> Yes <input type="checkbox"/> No      If yes, please specify: _____									
Race (for statistical purposes only): <input type="checkbox"/> African <input type="checkbox"/> Coloured <input type="checkbox"/> Indian <input type="checkbox"/> White									
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <i>(attach proof of status if married, divorced or widowed)</i>									
Home Address (not a PO Box): _____	Code: _____								
Postal Address (if different from home address): _____	Code: _____								
Home Telephone No: Area code (      ) Number _____	Cellphone: _____								
Address while studying (not a PO Box): _____	Code: _____								
Telephone No while studying: Area code (      ) Number _____	Cellphone: _____								
Email Address: _____									

**B. STUDY DETAILS:**

Highest School Grade Passed: \_\_\_\_\_ Year Passed: \_\_\_\_\_

Report 191 Programme:

- |  |   |   |   |   |
|--|---|---|---|---|
| <input type="checkbox"/> Art & Design        | <input type="checkbox"/> Engineering Studies      | <input type="checkbox"/> Hair Care              | <input type="checkbox"/> Management Assistant       | <input type="checkbox"/> Popular Music, Performance |
| <input type="checkbox"/> Business Mngmnt     | <input type="checkbox"/> Farming Mngmnt           | <input type="checkbox"/> Human Resources Mngmnt | <input type="checkbox"/> Marketing Mngmnt           | <input type="checkbox"/> Public Mngmnt              |
| <input type="checkbox"/> Business Studies    | <input type="checkbox"/> Fertilizer Manufacturing | <input type="checkbox"/> Hospitality & Catering | <input type="checkbox"/> Medical Secretary          | <input type="checkbox"/> Public Relations           |
| <input type="checkbox"/> Clothing Production | <input type="checkbox"/> Financial Mngmnt         | <input type="checkbox"/> Interior Decorating    | <input type="checkbox"/> Popular Music, Studio Work | <input type="checkbox"/> Textiles                   |
| <input type="checkbox"/> Educare             | <input type="checkbox"/> Food Services            | <input type="checkbox"/> Legal Secretary        | <input type="checkbox"/> Popular Music, Composition | <input type="checkbox"/> Tourism                    |

Report 191 Programme Code:

(Please tick all N-levels you intend completing in this academic year)

Report 191 Programme Level – Engineering Only:  N1       N2       N3

Report 191 Programme Level:  N4       N5       N6

**NOTE:** A bursary may only be awarded to students if a minimum of 3 subjects in the previous N-Level is completed successfully.

**C. PARTICULARS OF MOTHER/LEGAL GUARDIAN**

(completion of the particulars of the mother/legal guardian is compulsory. Attach death certificate if your mother/legal guardian is deceased or an affidavit if you do not know her whereabouts).

Surname: \_\_\_\_\_ Intials: \_\_\_\_\_ Title: \_\_\_\_\_

Identity Number: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Relationship (Mother/Legal Guardian): \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_ Code: \_\_\_\_\_

Home Telephone No: Area code ( \_\_\_\_\_ ) Number \_\_\_\_\_ Cellphone: \_\_\_\_\_

Full name of Employer of Mother/Legal guardian: \_\_\_\_\_

Physical Address of Employer: \_\_\_\_\_

\_\_\_\_\_ Code: \_\_\_\_\_

**D. PARTICULARS OF FATHER**

(completion of the particulars of the father is compulsory. Attach death certificate if your father is deceased or an affidavit if you do not know his whereabouts).

Surname: \_\_\_\_\_ Intials: \_\_\_\_\_ Title: \_\_\_\_\_

Identity Number: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Residential Address: \_\_\_\_\_

\_\_\_\_\_ Code: \_\_\_\_\_

Telephone No: Area code ( \_\_\_\_\_ ) Number \_\_\_\_\_ Cellphone: \_\_\_\_\_

Full name of Employer of Father: \_\_\_\_\_

Physical Address of Employer: \_\_\_\_\_

\_\_\_\_\_ Code: \_\_\_\_\_

**E. FAMILY ANNUAL INCOME/HOUSEHOLD:**

(Bring supporting information such as certified ID copies of the members in the household, the most recent payslip, pension slip, financial statement or death certificate of both of your parents or legal guardian or spouse - submission of this information is compulsory).

Gross Income (1): \_\_\_\_\_

Gross Income (2): \_\_\_\_\_

Gross Income (3): \_\_\_\_\_

Number of family members in household: \_\_\_\_\_ Number of students in household: \_\_\_\_\_

**F. COST OF STUDY**

<u>ITEM / DESCRIPTION</u>	<u>AMOUNT</u>
College Fees (per semester / trimester)	_____
Accommodation (if applicable)	_____
Transport (if applicable)	_____
<b>TOTAL</b>	_____

**G. FINANCIAL DISCLOSURE – OTHER BURSARIES/STUDY LOANS: (All funding applied for or received/guaranteed)**

<u>STUDIES FUNDED BY:</u>	<u>APPLICATION (X) or GUARANTEED ( )</u>	<u>AMOUNT</u>
1)		_____
2)		_____
3)		_____

**DECLARATION**

I declare that I have read and understand the content of this Application Form and that the information supplied is true and correct.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_