



higher education & training
 Department:
 Higher Education and Training
 REPUBLIC OF SOUTH AFRICA

2016

For use by the NSFAS Head Office

Acc.No

Bursary No.

Schedule of Particulars for the recipients of the Technical and Vocational
 Education and Training (TVET) College Bursary

FOR THE NC(V) PROGRAMMES

Important Note

Attach a certified copy of your South African Identity Document.
 Please use black ink when completing the Schedule of Particulars.
 Use of correcting fluids, (e.g. Tippex) will invalidate this Schedule of Particulars.
 Any alterations must be countersigned by the Student and the College.
 This Schedule of Particulars is only for the National Certificate (Vocational) Programmes.

TVET COLLEGE STAMP

A. PARTICULARS OF STUDENT

Surname: _____ Title: _____

Maiden Surname, if applicable: _____

First Names (as reflected on ID): _____

Identity Number:

Date of Birth: Y Y Y Y M M D D

Gender: Male Female

Disability: Yes No If yes, please specify: _____

Race (for statistical purposes only): African Coloured Indian White

Marital Status: Single Married Divorced Widowed

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. PARTICULARS OF NEXT OF KIN OR LEGAL GUARDIAN

Surname: _____ Intials: _____ Title: _____

Identity Number:

Relationship (Mother/Father/Legal Guardian/Sister/Brother/Spouse/Partner): _____

Residential Address: _____ Code: _____

Work Telephone No: Area code () Number _____ Cellphone: _____

Home Telephone No: Area code () Number _____

C. STUDY DETAILS:

Highest School Grade Passed: _____ Year Passed: _____

College Name: _____

Campus: _____

NC(V) Programme:

<input type="checkbox"/>	Civil Engineering & Building Construction	<input type="checkbox"/>	Finance, Economics & Accounting	<input type="checkbox"/>	Marketing	<input type="checkbox"/>	Safety in Society
<input type="checkbox"/>	Drawing Office Practise	<input type="checkbox"/>	Hospitality	<input type="checkbox"/>	Office Administration	<input type="checkbox"/>	Tourism
<input type="checkbox"/>	Education & Development	<input type="checkbox"/>	Information Technology & Computer Science	<input type="checkbox"/>	Primary Agriculture	<input type="checkbox"/>	Transport & Logistics
<input type="checkbox"/>	Electrical Infrastructure Construction	<input type="checkbox"/>	Mechatronics	<input type="checkbox"/>	Process Instrumentation	<input type="checkbox"/>	Primary Health
<input type="checkbox"/>	Engineering & Related Design	<input type="checkbox"/>	Management	<input type="checkbox"/>	Process Plant Operations		

NC(V) Level: Level 2 Level 3 Level 4

Student No: _____

D. PARTICULARS OF BURSARY

Tuition: R _____

Accommodation: R _____

Transport: R _____

Bursary Amount: R _____

Year to which Bursary applies: 2016

I DECLARE THAT I HAVE READ AND UNDERSTOOD THE CONTENT OF THIS SCHEDULE OF PARTICULARS AND THAT THE INFORMATION SUPPLIED IS TRUE AND CORRECT.

Insofar as NSFAS may by law be required to obtain the consent or authorisation of the Student for the processing of the personal information of the Student, the Student hereby agrees and consents to:

NSFAS processing the student's personal information as may be required to enforce or otherwise give effect to the bursary agreement, in the event that this application is successful, and any other agreement or arrangement concluded between the Student, NSFAS or any other third party, including but not limited to the processing of personal information by NSFAS and any third party service provider and other participants under any electronic voucher system where relevant; and the disclosure of personal information of the Student and information relating to any agreement or arrangement concluded between the Student and NSFAS to the South African Revenue Services..

Signed by the STUDENT at: _____ on this _____ day of _____ 2016

AS WITNESSES

1. _____ STUDENT SIGNATURE: _____

2. _____

For use by the TVET College

COUNTERSIGNED by the TVET COLLEGE at: _____ on this _____ day of _____ 2016

AS WITNESSES

1. _____

2. _____ DULY AUTHORISED THERETO: _____

For use by NSFAS Head Office

<p>ACCEPTED on behalf of NSFAS at CAPE TOWN on this _____ day of _____ 2016</p> <p>AS WITNESSES</p> <p>1. _____</p> <p>2. _____</p> <p style="text-align: right;">NATIONAL STUDENT FINANCIAL AID SCHEME: Duly Authorised thereto</p>
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National Student Financial Aid Scheme
 Private Bag X1, Plumstead, 7801
 Tel +27 (0)21 763 3200
 info@nsfas.org.za, www.nsfas.org.za

PARENT/GUARDIAN CONSENT

NSFAS requires personal information from SARS relating to the employment status and level of income of the parents or guardians of the applicant. NSFAS is committed to ensuring that the personal information obtained from SARS is treated confidentially and also to protecting the privacy of the persons whose personal information is obtained from SARS. NSFAS is further committed to protecting the personal information and to use that personal information in a lawful and transparent manner.

The personal information obtained from SARS will only be used:

- to assess and process the applicant's application and to ensure that the applicant receives the appropriate level of financial support from NSFAS;
- to confirm and verify the identity of the parents or guardians of the applicant;
- in connection with legal proceedings;
- for audit and record keeping purposes; and
- for debt tracing and/or debt recovery purposes.

I/We..... and the parent/s or guardian/s of the applicant, hereby give consent under section 69(6)(b) of the Tax Administration Act, 2011, that my/our taxpayer information in the records of the South African Revenue Service may be disclosed to NSFAS to the extent that it relates to my/our employment status and my/our levels of income.

Signed at _____ on this _____ day of _____ 2016

 FULL NAMES & SURNAME

 SIGNATURE

Witnesses

 FULL NAMES & SURNAME

 SIGNATURE

 DATE

 FULL NAMES & SURNAME

 SIGNATURE

 DATE

