

NHFC BURSARY FUND

Full-Time Tertiary Study Bursary Application Forms

NHFC Bursary Application Form

SECTION A: Per	SECTION A: Personal Details of Applicant																
SURNAME:						NAMES:											
Birth Date:	YYY	Y / M	IM / DD			Birth Place:											
Are you a South African Citizen:						^RSA ID	No.										
*If not a South Afric	ns <i>a, b,</i> & a	c:	a.Cour	ntry c	of birt	h											
b.Date Permit Issue	ite Permit Issued YYYY / MM / DD c. RSA Pe							ice Pe	ermit	No.							
Gender: tick applicable	Fem	ale			Male Race: Black								In	ndiar	1		
Disability? if yes, give details	Υ	Ν							Cold	oure	d		W	/hite	<u>;</u>		
Residential Address	: :																
								Post	al Co	de:							
Applicant's Tel. no.	:		[code:]		Cell-phone:											
Email Address:							Othe	er Cor	ntac	t:							
Have you ever been found			Y N If, Yes, specify the nature and date of offence														
guilty of a criminal of																	
-																	

SECTION B: High School Attended									
School Name:				Province:					
School Address:				Year Grade 12 Completed:					
				Postal Code					
Subjects: (list here-below)		High/Standard Grade	Symbol Obtained	List details of high	achievements, if any:				
				School:					
				SCHOOL.					
				Sports:					
				sports.					
				Community					
				Community:					
				Other:					

Attach proof of latest results



SECTION C: Post Grade 1	2/Mat	tric Q	ualifica	ations									
Name of qualification achieved / pursued:									Year o	f com	pletion:		
Nature of qualification	Docto	rate	Masters	Н	onors	Degree	Dipl	oma	Other (Specify				
Name of institution:													
Address of institution:													
Registrar Tel. No.::						Email a	addres	s:					
Are you currently studying?	Υ	N	If not st			9							
If studying, state the year of study:						Studer	nt Num	ber:					
Major Subjects/Course:					M	larks ob	tained	(%)					
list subjects marks for each Year (YR)		Yr	2 nd			^d Yr		^h Yr		Yr		Yr	
and Semester (S)	S1	S2	S1	S2	S1	S2	S1	S2	S1	S2	S1	S2	
					N/	larks ob	tained	(%)					
Ancillary Subjects/Course: list subjects marks for each Year (YR)	1 st	Yr	2 nd	Yr		d Yr	4 ^t	h Yr	5 th	'Yr	Yr		
and Semester (S)	S1	S2	S1	S2	S1	S2	S1	S2	S1	S2	S1	S2	

 $Attach\ proof\ of\ latest\ academic\ results\ or\ transcript/s$

SECTION D: Intended Study for the New Academic Year								
Name of Qualification:				Field of qualification:				
Are you receiving any other bursary or loan?	Υ	N	if YES, describe the nature of fin the institution that granted the	, e	ations involved and provide the name of			



SECTION E (i): Details of Applicant's Parents, Legal Guardian or Next of Kin														
SURNAME:				NAMES:										
Specify Relation to Applicant:				RSA ID No										
Employer:				Job Title:										
Work Address:														
					Pos	tal Co	ode:							
Residential Address:														
					Pos	tal Co	ode:							
Work Tel. No.:	[code:]			Cell	l-pho	ne:							
Home Tel. no.:	[code:]			Fax	:			СС	de:]			
Email Address:					Oth	ner Co	nta	ct:						

SECTION E (ii): Details of All Dependants															
Surname	Initials		ID / 13-digit Digit Birth Certificate No.							Age	Relationship to Bursary Applicant	Gen	nder		
														F	M
														F	M
														F	M
														F	M
														F	M

SECTION E (iii): Household Monthly Income Details [to be completed by Applicant's Parents/Legal Guardian]									
				Primary Breadwinner	Secondary Breadwinner				
	Employed *	Υ	N						
Indicate if you are:	Self Employed *	Υ	N						
	Social Welfare *	Υ	N						
[*If "Y, insert details, e.g. I	Name of Employer if Em	ployed,	Туре о	f Business, or Type of Social Grant, etc.]					
Basic Monthly Income:				R	R				
Social Welfare Grant:				R	R				
Total Household Incom	e:			R					



	CTION F: Required Documents licate inclusion/receipt with a ✓ or ⊁ in the applicable box)	Appl	icant	Official use only
1.	Certified copy of Grade 12 results and all past Academic results	Υ	N	
2.	Certified copy of R.S.A. Bar Coded Identity Document of Bursary Applicant	Υ	N	
3.	Certified copy of R.S.A. Bar Coded Identity Document of Parent/ Guardian	Υ	N	
4.	Certified copy of ID/Birth Certificates of all persons listed as part of household	Υ	N	
5.	Certified copy of Proof of Monthly Income of Parent/ Guardian	Υ	N	
6.	Certified copy of Academic record on the official letterhead of the University	Υ	N	
7.	Current first year students to provide proof of admission by the University	Υ	N	
8.	Certified copy of Permanent Residence Permit (Bar Coded Permit)	Υ	N	

SECTION G: Declaration

NHFC Bursary Fund APPLICANT

2.	I hereby, acknowledge that if ANY of the information provided in this application form is found to be incomplete and/or

1. I hereby, declare that ALL the information provided in this application form is complete and correct.

Signed at	on this	day of	20
		,	
	9	Signature:	
full names		-	who warrants is duly authorised hereto

Applicant's PARENTS / LEGAL GUARDIAN

incorrect, my application will be disqualified.

- 1. I hereby declare that I am the Parent / Legal Guardian of the abovementioned NHFC Bursary Fund Applicant.
- 2. I hereby declare that all my details, as given in this NHFC Bursary Fund Application form including my income and employment status, are true and correct.

Signed at	on this	day of	20
		Signature:	
full names			who warrants is duly authorised hereto

