South African National Defence Force Education Trust

(SANDF Education Trust Reg. No IT 3428/13/PBO No 930044495/NPO 134-347)

(Application for Financial Aid for Educational Purposes: 2016)

IMPORTANT INFORMATION PERTAINING TO A SANDF EDU TRUST BURSARY

- The main objective of the SANDF Education Trust is to provide financial aid by means of a bursary scheme to the dependents of the following categories of persons:
 - SANDF members killed or severely injured subsequent to 27 April 1994 whilst on official duty;
 - Civilian members of the Department of Defence killed or severely injured subsequent to 27 April 1994 whilst deployed in operations with the SANDF; and
 - Citizens of the Republic of South Africa killed or injured subsequent to 27 April 1994 during the course of an operation of the SANDF, provided that such citizens were not engaged in an activity in opposition to the aims of the SANDF operation,

who are or will be attending primary, secondary or tertiary educational institutions.

- When considering applications, the Board of Trustees will take into account the merit and need of the applicant and therefore the annual gross income of the Parent/Guardian/Caregiver is also considered as criteria for the awarding of a bursary.
- The Board of Trustees of the SANDF Education Trust determines the minimum and maximum bursary amounts to be allocated to each applicant and the amounts may vary annually.
- The mandatory National Means-Test is applied to all applications to determine the value of the bursary amount. An **Expected Family Contribution (EFC)** towards school/study fees might be required depending on the **gross** income of the parent(s)/guardian(s).
- All other bursaries that the learner/student will receive whether from Institution funds or independent bursars have to be taken into account when the Trustees apply the Means-Test and has to be deducted from the SANDF Education Trust allocation.

ACADEMIC REQUIREMENTS (APPLICATION FOR TERTIARY STUDIES)

- Prospective tertiary <u>first year students</u> must have obtained an APS-score of at least 22 during their June Grade 12 examinations and must apply before 15 October of the preceding year of study.
- Senior students must pass at least 60% of the modules taken to qualify for a SANDF Education Trust bursary in the next year. The <u>closing date for senior students</u> is 01 October annually.

MAXIMUM AGE RESTRICTION (LEARNERS - PRIMARY AND SECONDARY)

The Board of Trustees will at its discretion decide to what age individuals will receive financial assistance.

SECTIONS TO BE COMPLETED

- Primary School Learners Complete Sections A, B, C1, E and F.
- Secondary School Learners Complete Sections A, B, C2, E and F.
- Tertiary Institution Learners Complete Sections A, B, D1, D2, E and F.

PLEASE READ THROUGH CAREFULLY BEFORE COMPLETING THE APPLICATION FORM

SECTION A: DETAIL OF DECEASED/INJURED SANDF MEMBER (COMPULSARY)

Name of deceased/injured member:								
Force Number: Unit: ID Number:								
Cause of death/injury (Short description of the	e incident th	at led to the d	eath/inju	ıry):				
Date of death/injury:		Place of Dea	ath:					
Relationship of the deceased/injured with	h the applic	ant (Learner	r) e.g. F	ather				
SECTION B: DETAIL OF FATHER/	MOTHER	STEP PAR	RENT/C	SUARDI	AN/CA	REG	SIVER	
What is your relationship with the applicant?	Father	Mother	Step	parent	Guard	dian/C	aregive	er
Surname:					ials:			
Residential Address:	Postal Address:							
Postal C	ode.			P	ostal c	ode		
ID Number:	Married	Single	e	Divorced			dow/er	1
Telephone number:		upation:	9	Divologe	•	****	3011/01	
E-mail address:		аранон.						
E mail address.								
SECTION C1: PERSONAL DETAILS O	THE AD	DI ICANT (D	PIMAR	V SCHO	OL)			
OLOTION OT LINGUINAL DETAILS O	<u>'' </u>	i LIOAITI (I	IXIIVIAIX		<u> </u>			
Surname:	ID Nur	mhor:			۸	ao:		
	וט וזעו	nber.			P	.ge:		
First names:								
Grade that learner will be in (2016):			TalNla	_				
Name of School:			Tel No	:				
Physical Address of School:								
			D 1 - 1	0				
			Postal	Code:				
Postal Address of School:								
				<u> </u>				
			Postal		1		T	Т
Is the learner registered at the above sch	nool for the	2016 acade	mic yea	ar?	Ye	S	No	
						_		
SECTION C2: PERSONAL DETAILS O	F THE AP	PLICANT (S	ECON	DARY SC	HOOL)		
Surname:	ID Nur	mber:			- /	Age:		
First names:								
Grade that learner will be in:								
Name of School:			Tel No	:				
Physical Address of School:								
			Postal	Code:				
Postal Address of School:								
			Postal	Code:				_
Is the learner registered at the above sch	nool for the	2016 acade	mic vea	ar?	Ye	3	No	

SECTION D1: PERSONAL DETAILS OF THE APPLICANT (TERTIARY INSTITUTION) Surname: ID Number: Age: First names: Tel No: Name of Institution: Physical Address of Institution: Postal Code: Postal Address of Institution: Postal Code: Is the learner registered at the above institution for the 2016 academic year? Yes No Student Number: SECTION D2: PARTICULARS OF COURSE AND STUDY DIRECTION Are you a first-time applicant for financial aid from the SANDF Education Trust? Yes No (Please tick) Qualification type: (please tick) Degree Diploma Name of qualification (e.g. B Sc, B Eng, B Ed) Nature of study (e.g. Conservation, Civil Eng, Accounting) Normal duration of course Year first registered for this course (e.g. 2014) Current year of study (e.g. year 1 SECTION E: FINANCIAL DETAILS OF FAMILY SUPPORTING THE APPLICANT This must be the financial detail of the person indicated in Section B Full name Title **Full Names** Surname (as per RSA ID Book) Occupation Claiming UIF? Unemployed YES NO YES NO Employed by (Name of company or individual) What type of employer is this? State Private (Please tick) Individual Informal Amount Source of income Wages/Salary Social Grant Maintenance Pension/Guardian Fund Other (e.g. Master of the High Total per month Gross income per year | R Is Tax paid on this income? YES NO

If YES, please provide Income Tax Number

SECTION F: DECLARATION BY APPLICANT OR PARENT/STEP PARENT/GUARDIAN/ CAREGIVER IF APPLICANT IS UNDER THE AGE OF 18 YEARS

Are you currently under an administration order? YES NO

I, the undersigned, declare that the information provided in this application form is correct, and I have included all information on family income to the best of my knowledge. I understand that the information requested in this form may have to be verified for purposes of a fair allocation of scholarship/bursary award. I understand that, should any relevant information have been omitted or found to be incorrect, it could result in any/all funding being cancelled/revoked. I consent to the Board of Trustees giving details of the applicant's academic record and financial profile to donors of the Trust.

Signature	Date

SECTION G: CLOSING DATES FOR APPLICATIONS

Senior Students/Learners (2 nd year of study onwards)	01 October annually
First Year Tertiary Students/Learners:	15 October annually
Primary and Secondary Learners:	15 October annually

SECTION H: DOCUMENTS REQUIRED TO APPLY FOR A SANDF EDUCATION TRUST BURSARY

Kindly submit certified copies of the following documents along with the application form:

- First Time Applicants: Birth certificate/Identity document of the applicant/beneficiary, Identity document of the deceased/severely injured SANDF member, death certificate of the deceased SANDF member/medical report indicating degree of injuries of injured member and Identity documents of the beneficiary's parent/guardian/caregiver.
- o Proof of registration at the school/institution or student number or letter of confirmation of provisional acceptance for the course (in the case of 1st year tertiary learners).
- Quotation from the institution on the fees (registration, tuition, accommodation, transport, uniform and books).
- Proof of household income recent payslips (not older than 2 months), or a letter from the employer indicating the monthly salary if the parent/guardian/caregiver is a domestic worker or an affidavit stating the rand value of the income gained per month if a member of the household is working in the informal sector where official payslips are not issued. Income received from Pension-/Guardian-/Trust Funds or the Master of the High Court must be declared and proof of such pay-outs must be provided.
- If there is anybody/sibling in the household that receives a state pension or a child support grant, proof is needed. A certified copy of the most recent pension slip, pay point slip or an original 3 month bank statement should be submitted.
- In the case of senior tertiary students, Grade 12 certificate and proof of the latest academic results.
- In the case of current Grade 12 learners applying for assistance with tertiary studies, school report of the June examinations.

Please note that documents may be faxed or sent via e-mail. Documents can also be handed in by hand or mailed

Please make sure all required documentation is attached before submitting the application form as incomplete applications will not be processed until the supporting documents are complete.

Bursaries are awarded for one academic year only. Beneficiaries need to re-apply each year according to the closing dates for submission of applications. Continued financial assistance will be in accordance with the academic progress made by the applicant and the financial status of the household.

SECTION I: SUBMISSION OF A	APPLICATIONS	
Mail applications to:	Hand delivered applications at:	E-mail address:
Chairperson Board of Trustees	Chairperson Board of Trustees	sandfedutrust@gmail.com
SANDF Education Trust	SANDF Education Trust	
Private Bag X161	Armscor Building, Room 1.3.137	Facsimile number
Pretoria	C.O. Nossob and Delmas Road	012-355 5882

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0001	Eras	muskloof, Pretoria		
SECTION J: CON	NTACT DETAILS FOR E	NQUIRIES		
Direct general enq	uiries on the SANDF Educ	ation Trust in accordance	ce with the follo	owing:
E-mail address:	sandfedutrust@gmail.com	1		
Telephone:	012-355 5107	<u>!</u>		
Facsimile:	012-355 5882			
SECTION K: OFF	FICIAL CERTIFICATION			
registered/not regist application form. It i killed/severely injure	fy that according to the official tered* as a dependent of the is further certified that the model whilst on official duties a Trust his/her dependents materials.	e deceased/severely injure ember indicated in Section and therefore in terms of cla	d* member indiction A of this application application 4 of the De	cated in Section A of this ation form was eed of Trust of the
Name of Controllir	ng Officer	Signature of Controlling	ng Officer	Date
Contact Number				
SECTION L. DEC	CISION BY THE BOARD	OF TRUCTEES		
SECTION L. DEC	JOION BY THE BOARD	OF INUSTEES		
AMOUNT AWA	RDED SIGNATURE CHA	IRPERSON: TRUSTEES	l n.	ATE
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SECTION M: OFFICE USE
Application served at the Trustee meeting of
Decision of the Trustees forwarded to the Trust Administrator in a consolidated letter on
under reference
Applicant notified on