

## **BURSARY APPLICATION FORM**

## Please print and complete this form

Applicant Details		
Name and Surname		
Telephone/Cell Number (please complete)		
Email Address (please complete)		

Tick  $(\checkmark)$  the appropriate box for the discipline in which you are currently studying or going to study:

Mechanical Engineering	Mining (Rock Engineering)	
Electrical Engineering	Mining Engineering	
Metallurgy	Chemical Engineering	

Please complete the application form as thoroughly as possible in BLACK INK and fax/email it to:

Fax: Email:

086 267 3437 <u>khuphuka@samancorcr.com</u>

Attention: Bursary Coordinator

Closing date: 17th September 2017

If you have not heard from us by the 30th October 2017, please consider your application to be unsuccessful.

NOTES AND INSTRUCTIONS (Read these notes carefully before you complete the application form)

- 1. Ensure that you read every section and that the information you provide is accurate.
- 2. INCOMPLETE APPLICATION FORMS WILL NOT BE CONSIDERED.
- 3. Your application will not be considered if you do not submit proof of your academic results and full details of your academic record. Results for the academic year should accompany this application and must not be submitted separately.
- 4. Do not send original documents (e.g. certificates). Attach required certified copies to application.
- 5. Selection requirement:
  - a) University admission for current scholars (Grade 12)
  - b) Students studying on a full time basis and successfully completing their 1<sup>st</sup> 3<sup>rd</sup> year of study at a South African University.

i Aiti i 7	APPLICATION DETAILS
Degree / Diploma you intend to study / studying:	
Do you have provisional university admittance? (Attach proof)	
Are you currently registered at a University for this course?	
Study year for which you will be registered next year (e.g. first, second etc)	
Does this study year include Experiential Training (P1/P2)?	
Name of current / proposed University	
Have you applied for a Samancor Chrome Bursary before?	
If yes to the above, state for which discipline and when	
Have you applied to any other company/ies for a bursary?	
State which company/ies	
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Surname	T 2 - PERSONAL
	T 2 – PERSONAL
Surname	T 2 – PERSONAL
Surname Full Name	T 2 – PERSONAL
Surname  Full Name  First Name / Nick Name	T 2 – PERSONAL
Surname  Full Name  First Name / Nick Name  Gender	T 2 – PERSONAL
Surname  Full Name  First Name / Nick Name  Gender  Date of Birth  RSA Identity Number	T 2 – PERSONAL

Current Residential address		Current postal address (only applicable if it is different from your residential address)	Residential Address of Parent/Guardian	
Postal Code:		Postal Code		
Province (Please complete):		Province (Please complete):		
Tel. No.: ( )			Province (Please complete):	
Name of Parent / Guardian:				
Relationship:				
Tel. No. of Parent/Guardian:	Work	: ( ) / Home: ( )		
	Cellp	hone:		
Details of an alternative family m	embe	er or friend that we can contact if we have	ve difficulty reaching you directly:	
Relationship:				
Name:		Tel. No.: ( )		
Please indicate if either you or you	our pa	arent/s have been or are currently emplo	oyed by Samancor Chrome:	
Name and Surname				
Relationship (Mother/Father)				
Business Unit				
Department Occupation				
Year				

#### PART 3 (A)- SECONDARY EDUCATION

Name of Secondary School/s you are currently attending/have attended previously:

Name of school	Yea	Grade completed	
Name of School	From	То	Grade completed

Please state your results for Grade 10, 11 and 12 (please specify percentage % obtained in every subject)

Subjects	Grade 10 % obtained	Grades HG/SG	Grade 11 % obtained	Grades HG/SG	Grade 12 % obtained	Grades HG/SG

Have you written your Final Grade 12 exams?	Yes	No		
If yes, complete the following: Year of examinat	ion:			
Enter final Matric symbols obtained  If you have completed the first block of Grade 12 – please complete as well.				

Subject	HG/SG	Symbol
	Aggregate Symbol:	

# PART 3 (B)- HIGHER EDUCATION

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Name of University	
Student Number	
Year Commenced	
Degree/ Diploma Course	
Number of Practical Semesters successfully	
completed	

### **NB: ATTACH PROOF OF RESULTS**

NB. ATTACH PROOF OF RESULTS	V	% obtained		
1 <sup>st</sup> year of study (state subjects)	Year	June	Dec	
		-0/ - L-t-	in a d	
2 <sup>nd</sup> year of study (state subjects)	Year	% obta June	Dec	
		June	Dec	
	V	% obta	ined	
3 <sup>rd</sup> year of study (state subjects)	Year	June	Dec	

Please provide details if you are repeating any subjects:			

Please supply details of your achievements (academically and personally)  Achievements  PART 5 - FINANCIAL AID INFORMATION / EMPLOYMENT HISTORY  Do you currently have a scholarship, bursary, or loan? Yes No  If yes, what is the name of the bursary/grant?				
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Details of current and/or previous employment:				
Employer Occupation Year  To				

Employer	Occupation	Year	
		From	То

Have you ever visited a mine or smelter? If so, give us details of where, when and what your impressions were:	
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Briefly state why you have chosen to pursue you intended career:	-
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DECLARATION I hereby give full consent to undergo medical tests/examinations as required by Samancor Chrome	
<ol> <li>I confirm that the information contained in this application is, to the best of my knowledge, correct and truthful and I understand that if it not, I may be eliminated from consideration in the selection process. If, after being admitted to the training scheme, any falsehoods omissions are discovered in my application, I understand that my Bursary Agreement may be terminated.</li> </ol>	
2. I understand that all statements in my application may be investigated and I authorise the organisation to contact the following persons w might be able to speak about my abilities and suitability for the bursary for which I have applied:	าด
Name and Surname Relationship/Position Contact No.	
3. I understand that an investigation of me might include reference checks from my school/university/previous employer/s. I authorise a School/University and/or Employer, to provide Samancor Chrome with relevant information and opinions that may be useful in making decision and release such persons and organizations from legal liability in making such statements. (Please specify persons/institution you would like us to contact.)	a
Name and Surname Relationship/Position / Institute Contact No.	
<ol> <li>I hereby indemnify Samancor Chrome against any claim for illness or accidental injury sustained by me during a visit to their operation should I be invited to attend such a visit.</li> </ol>	ıs,
Signature of Applicant: Date:	