

4.12. GROSS ANNUAL INCOME OF SPOUSE: R

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(Attach copies of payslips)

4.13. ANY OTHER SOURCES OF INCOME: R

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5. DECLARATION BY PARENT/GUARDIAN

I Declare that the above information furnished

above is true and correct

SIGNATURE

DATE

SCHOOL STAMP

SUMMARISED SELECTION CRITERIA

1. RESIDING WITHIN GREATER MIDDELBURG AND PHOLA (OGIES) AREA.
2. FROM A NEEDY FAMILY
3. ACHIEVING 60% AND ABOVE / (LEVEL 5) IN KEY SUBJECTS : PHYSICIANS/ MATHS
ACCOUNTING/ENGINEERING
LIFE SCIENCE
4. FOLLOWING SCIENCE, ENGINEERING, COMMERCE, TECHNOLOGY AND LAW STREAM
5. EXEMPTION/ BACHELOR'S PASS IN GRADE 12.

N.B. HIGH SCHOOL LEARNERS RECEIVE OUTRIGHT GRANTS, TERTIARY STUDENTS
RECEIVE BURSARY LOANS

Return completed application form to: **THE ADMINISTRATOR**

**P.O. BOX 390
MIDDELBURG
1050**

SIGNATURE

DATE

FOR OFFICE USE ONLY

DATE RECEIVED:

APPROVED/NOT APPROVED:

CHAIRPERSON

SECRETARY

PATRON

SIGNATURE:

DATE:

**SCHEDULE OF PERSONAL DETAILS
IN RESPECT OF
LOAN AGREEMENT**

1. PARTICULARS OF GRANTEE

SURNAME: _____

MAIDEN SURNAME: _____

FULL NAMES: _____

ID NUMBER: _____

DATE OF BIRTH: _____ GENDER: _____

MARITAL STATUS: _____

POSTAL ADDRESS: _____

_____ CODE: _____

PHYSICAL ADDRESS: _____

_____ CODE: _____

TELEPHONE: (HOME) _____

TELEPHONE: (WORK) _____

FAX NUMBER: _____

CELLPHONE: _____

E-mail: _____

2. PARTICULARS OF NEXT OF KIN (PARENT/ GUARDIAN/ SPOUSE)

FULL NAMES AND SURNAME: _____

ADDRESS: _____

RELATIONSHIP: _____

TELEPHONE (HOME) _____

TELEPHONE (WORK) _____

FAX NUMBER: _____

CELLPHONE: _____

E-mail: _____

3.PARTICULARS OF TERTIARY INSTITUTION

NAME: _____

COURSE OF STUDY: _____

YEAR OF STUDY: _____

STUDENT NUMBER: _____

SIGNATURE: _____

WITNESS NAMES: _____