

## FETAKGOMO TUBATSE LOCAL MUNICIPALITY

## FETAKGOMO TUBATSE LM: EXTERNAL BURSARY APPLICATION FORM FOR ACADEMIC YEAR 2024.

## INSTRUCTIONS!

- Use block letters to complete this form
- ❖ Give concise answers and where applicable mark with X
- This form is only for use by persons who are not staff members of the Municipality

The Municipal Local Manager Fetakgomo Tubatse Local Municipality P O Box 206 BURGERSFORT,1150

A. FETAKGOMO TUBATSE LOCAL MUNICIPALITY							
Have you previously received this bursary? Yes No							
Name of degree/diploma							
Major subjects							
B. PARTICULARS OF APPLICANT							
TitleSurname							
First names							
Male Female							
Identity number							
Nationality							
Marital StatusHome Language							
Residential Address							
Postal AddressCode							
Contact No Email.							
Parent/ Guardian Contact No:							

C. PARTICULARS OF DEGREE/DIPLOMA FOR WHICH YOU WISH TO RECEIVE THE BURSARY					
At which University/University of technology/Public TVET College do you intend studying?					
Degree e.g. B.Comm					
Main Subjects					
Indicate the academic year of study for which you are applying					
D.OTHER BURSARIES OR SPONSORS					
Do you presently study with a bursary? Yes No					
If yes name of the bursary					
Annual value of the bursary					
Father's Occupation					
Mother's Occupation					
Guardian's Occupation					
Mark your monthly income group(R):					
Attach a proof of income or a sworn affidavit					
Mark your mother's monthly income (R) :					
Mark your guardian's monthly income (R) :					
How many other dependents are at home:					
No of dependents at tertiary institution					
No of dependents still at school					
Do you have study loan? Yes No					
If yes name of the loan					
For what purpose?					
When did you receive it?					
If you are not currently enrolled at an educational institution please indicate what you are doing at present;					

E. PRIZE AND AWARDS RECEIVED							
Name/Type of Award		Name of sponsor			Amount/Value		
F. ACADEMIC REFERENCE							
Surname	Initials	Title	Re	lationship	Address		
1.							
2.							
3							
O. DOGULEDVINATION							
G. DOCUMENTATION  Please attach certified copies of the following:							
reade attach certified copies of the following.							
❖ A certified Grade 12, recent statements of results/academic record.							
<ul> <li>Certified copy of ID/ Birth certificate,</li> <li>Proof of admission from an accredited and registered tertiary institution</li> </ul>							
(University/University of Technology/Public TVET Colleges)							
Salary advice/Proof of parents/guardian monthly income (Not older than 3							
months) or an affidavit where there is no fixed monthly income,  • Proof of residence							
H.DECLARATION							
I certify that the information supplied in this application is correct and that, if I am awarded a bursary, I will abide by the regulations applicable.							
Names: Surname:							
Signature of applicant							
Date							