SAFRIPOL COMMUNITY BURSARY APPLICATION FORM

Safripol is committed to comply with the regulations as set out in the Protection of Personal Information Act 4 of 2013. In disclosing your personal details as well as that of your dependent, you hereby acknowledge and agree that you have read and understood the content of the Safripol Protection of Personal Information Policy. You furthermore consent to the lawful collection, use, disclosure and storing of this information by the Company for the application of community bursaries only.

A)	PERSONAL DETAILS:							
	APPLICANTS DETAILS:							
1.	Surname:		Mr/Mrs/Miss					
2.	First names (in full):							
3.	Date of birth:							
4.	Residential address: (please attach proof of residence)							
5.	Postal address:							
	PARENT/GUARDIAN DETAILS:							
6.	Dr/Mr/Mrs/Miss: (Full names and surname of parent or guardian)		7. ID No:					
8.	Relationship with Student:							
9.			10. Contact no:					
11.	Employer:							
12.								
13.								
	a) Yes, state name of institution that granted bursary/study loan and	d the obligation	on:					
	b) Bursary amount:							
	COMPLETE ONLY B.1 OR	R B.2						
	QUALIFICATIONS:	0.1.0 ("	P. 11.)					
<u> </u>	·	CAO no. (if applicable):						
a)		b) Grade 12 Final examination written / to be written during 20						
c)	Town / City d) Province:							
e) Subjects studied and symbols obtained in most recent examination Trials Results:								
	Applicant should enclose a certified copy of the most recent office	cial matricula	ation results					

B2)	University and other training:	Student Number:					
a)	Degrees / Courses already obtained	s / Courses already obtained / passed:					
b)	At present entered for the	degree / course at:					
c)	Total duration of course	semesters/years					
b)	Present year of study and subjects:						
e)	When did you commence post matri	culation studies?					
f)	Have you failed any year of study?						
g)							
	Attach a certified copy of your co	mplete, OFFICIAL Academic Transcript furnishing the annual records / symbols / versity examinations already written.					
C)	COURSE OF STUDY						
1.	. Degree / course you intend sitting for and major subjects:						
2.	2. Is Grade 12 a prerequisite for the course you intend following? Yes No No						
3.	Are you enrolling for full time or part time study?						
4.	part time, state annual income:						
5.	At which institution do you intend stu	idying?					
6.	Year in which study commences:	Duration of courses : years					
D)	DECLARATION						
	I / we declare that the above particulars are complete and correct:						
	SIGNATURE OF APPLICANT	DATE					
	SIGNATURE OF PARENT / GUARD	IAN DATE					
FOR OFFICE USE ONLY							
□A	pproved	□ Not Approved					
Bur	sary Committee/HR	DATE					

Current Matric			Continuing Student			
If you are entering your first tertian furnish the following of Please tick the boxes under "Applicant documents are atta	documents. Check" to indica	If you have completed at least 1 year of tertiary study and you have promoted to your next academic year, please furnish the following documents. Please tick the boxes under "Applicant Check" to indicate which documents are attached.				
Document	Applicant Check	Office Check	Document	Applicant Check	Office Check	
Certified copy of applicant ID			Certified copy of applicant ID			
Affidavit of Declaration of Dependency to Parent / Guardian			Affidavit of Declaration of Dependency			
Certified copy of Grade 11 report			Certified copy of Matric Certificate			
Certified copy of latest Grade 12 report*			Certified copy of academic transcript			
Acceptance letter from preferred tertiary education institution			Updated fee statement			
Proof of income of Parent / Guardian / Proof of SASSA			Proof of Enrolment for 2024 academic year			
Testimonial from Current High School			Motivation Letter			
Proof of residence			Proof of residence			
*Your final matric results should SAFRIPOL as soon as it is availa NED at	ble		day of		20	
WITNESS:						
			BURSARY APPLICAL	MT		

Completed application and required documents to be e-mailed to bursary@safripol.com before 30 November 2023