



KWAZULU - NATAL GOVERNMENT

PROVINCIAL BURSARY APPLICATION FORM FOR 2025 ACADEMIC YEAR

Name of Department to which application is addressed: _____

Name of the applicant: _____

University you intend to study in: _____

Name of the degree or diploma which you are applying for: _____

District: _____

Please print when completing this form. Mark appropriate blocks with an "X" Failure to complete this application form fully and correctly may prejudice the applicant's chances of obtaining a bursary.

Submit the completed application form and the relevant attachments as per address supplied in the advertisement.

PERSONAL PARTICULARS

FIRST NAMES: _____

SURNAME: _____

IDENTITY NUMBER: _____

DATE OF BIRTH: _____

POSTAL ADDRESS: _____

PHYSICAL ADDRESS: _____

TELEPHONE NUMBER: (____) _____

DISTRICT: _____

CELL PHONE NUMBER: _____

LOCAL MUNICIPALITY: _____

ALTERNATE NUMBER: _____

WARD NUMBER: _____

EMAIL ADDRESS: _____

COUNCILLOR: _____

NATIONALITY: _____

MARITAL STATUS:
Single/Married/Divorced/Widowed

GENDER: Male/female

DISABILITY: YES/NO _____

RACE: Black/Coloured/Indian/ White

Are you currently employed? YES/NO If yes, please elaborate _____

Have you ever been convicted of a criminal offence, dismissed from employment or requested to resign? YES/NO
If the answer is yes please furnish full details on a separate sheet of paper.

Did you consult a vocational counsellor regarding your choice of study?

YES/NO

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<p>Current year of study:</p> <hr/>	<p>Name of degree/diploma:</p> <hr/> <hr/>
<p>What is the remaining duration of your current studies as prescribed by the tertiary institution?</p> <hr/> <hr/>	<p>List the subjects that still need to be completed to obtain the relevant qualification:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Please indicate the year you started studying for the current course of studies:</p> <hr/>	<p>Have you ever failed any year of study? YES/NO</p> <p>Which year? _____</p>
<p>Have you rewritten the examination/s for the subject/s failed? If yes, please indicate the date of the examination:</p> <hr/> <hr/>	<p>Student number at current institution:</p> <hr/>

SIGNATURE OF APPLICANT

DATE

WITNESS

DATE

WITNESS

DATE

SIGNATURE OF PARENT/LEGAL GUARDIAN _____

DATE: _____

WITNESS

DATE

WITNESS

DATE

FOR OFFICE USE ONLY

APPROVED/NOT APPROVED

DIRECTOR-GENERAL

SIGNATURE

DATE: _____