



APPLICATION FORM (2021): DISASTER MANAGEMENT BURSARY

PLEASE PRINT CLEARLY IN BLOCK LETTERS

| | | | | |
|---|--------------|---------------------------------------|--------------------------------|-------------|
| SURNAME: | | ID NO: | | |
| FIRST NAMES: | | NATIONALITY: | | |
| GENDER: | | RACE: | | |
| HOME ADDRESS: (RESIDENTIAL) | | POSTAL ADDRESS: | | |
| | | | | |
| | | | | |
| | | STUDENT NO (If Applicable) | | |
| ARE YOU FROM? (indicate with an X) | URBAN | RURAL | INFORMAL SETTLEMENT | FARM |
| HOME TEL NO: | | CELL NO: | | |
| EMAIL ADDRESS | | | | |
| DO YOU HAVE ANY PHYSICAL DISABILITY: | | YES | NO | |
| IF YES PLEASE SPECIFY THE NATURE OF THE DISABILITY | | | | |
| WHERE DID YOU COMPLETE YOUR GRADE 12? | | | | |
| NAME OF SCHOOL | | | YEAR COMPLETED | |
| | | | | |
| ARE YOU ALREADY ACCEPTED / REGISTERED AT A PUBLIC INSTITUTION OF HIGHER LEARNING? | | | YES | NO |
| IF YES, NAME OF INSTITUTION (ATTACH COPY OF ACCEPTANCE LETTER / PROOF OF REGISTRATION) | | | | |
| CURRENT YEAR OF STUDY (Indicate with an X) | 1ST | 2ND | 3RD | 4 TH |
| ATTACH A STUDY QUOTATION FOR 2021 | | | | |

**ALL APPLICATION FORMS MUST BE SUBMITTED TO THE
DEPARTMENT OF COOPERATIVE GOVERNANCE AS STATED IN THE
ADVERTISEMENT**

| PARENT/LEGAL GUARDIANS/CAREGIVER INFORMATION <i>(IN THE CASE OF DEPENDENTS)</i> | |
|--|--|
| SURNAME: | |
| RELATIONSHIP E.G. PARENT/GUARDIAN | |
| FIRST NAMES: | |
| EMPLOYER: | |
| OCCUPATION: | |
| ID NUMBER: | |
| TELEPHONE NO: | |
| FAX NO: | |
| E-MAIL ADDRESS: | |
| CELLPHONE NO: | |

| CHECKLIST FOR SUPPORTING DOCUMENTS | YES / NO |
|---|----------|
| APPLICATION FORM | |
| ACCEPTANCE LETTER/ PROOF OF APPLICATION AT A PUBLIC INSTITUTION | |
| CERTIFIED ID COPY | |
| MATRIC CERTIFICATE | |
| CERTIFIED QUALIFICATIONS | |
| CURRICULUM VITAE | |
| MOTIVATION LETTER | |
| PROOF OF INCOME/ AFFIDAVIT | |
| PROOF OF RESIDENCE | |

Please indicate whether all the necessary attachments have been included:

I _____, ID: _____ confirm that the information I have provided herewith is correct.

Signature: _____

Date:

CLOSING DATE FOR APPLICATIONS IS 30 DECEMBER 2020.

NO APPLICATION FORM WILL BE ACCEPTED AFTER THE CLOSING DATE AND FAILURE TO PROVIDE ALL THE REQUIRED INFORMATION AND DOCUMENTS WILL IMMEDIATELY DISQUALIFY THE APPLICANT.