

PYROTECHNICAL MARKETING (PTY) LTD BURSARY APPLICATION FORM FOR 2022

In order for your application to be processed, please ensure that you complete all relevant sections of this application form and attach all the required supporting documents in one pdf document. Preference will be given to first year students with a minimum average of 70% overall grade.

Please note the following:

- i. All applications are to be completed in black pen.
- ii. Incomplete application forms will not be considered.
- iii. Do not attach original documents to the application form as the documents submitted will not be returned.

Checklist – documents should be in the order below in one pdf document when submitting:

- 1. Pyrotec bursary application form (this can be found on our website)
- 2. One-page Letter of motivation suggesting why the applicant should be awarded a bursary
- 3. Certified copy of grade 12 or highest level of education
- 4. Certified copy of ID
- 5. Proof of address should you require a transport allowance
- 6. University acceptance letter or proof of registration
- 7. Proof of estimated costs or actual invoices (Tuition, travelling, accommodation, text books; previous years quotes will be accepted as well)

| APPLICANT PERSONAL INFORMATION | | | | |
|--------------------------------|--------------|---------|--------------|--|
| Full Name: | | | | |
| Preferred Na | ame: | | | |
| ID No.: | | DOB: | | |
| Age: | Nationality: | Gender: | Race: | |
| Contact number: | | | | |
| Physical Address: | | | | |
| City: | | | Postal Code: | |
| Email address: | | | | |

Please tick the field of study you are applying for below

- o Information Technology and communication
- o Engineering
- o Health Professionals and related Clinical services
- o Architects, Town Planners and Surveyors
- o Business, management and economics
- o Natural and Social Science Professionals
- o Quality and Regulatory Professionals

- Media Professionals, Artistic, Literary, Design and Graphic Design/DTP
- Sales, Marketing and related associate
 Professionals
- o Sports and Fitness
- o Finance
- o Human Resources

| COURSE INFORMATION | | | |
|--|--|--|--|
| Name of Course: | | | |
| Institution: | | | |
| ESTIM | MATED COSTS | | |
| Tuition: | | | |
| Text books: | | | |
| Accommodation: | | | |
| Travelling: | | | |
| Total: | | | |
| | | | |
| N N | EXT OF KIN | | |
| Full name: | | | |
| Contact number: | | | |
| Email: | | | |
| Relationship: | | | |
| | | | |
| | EC EMPLOYEE(IF APPLICABLE) | | |
| Full name: | | | |
| Contact number: | | | |
| Email: | | | |
| Relationship: | | | |
| | and correct. I understand that any misrepresentation or ed as sufficient grounds for withdrawal of an offer or | | |
| | | | |
| Signature of applicant | Date | | |
| | | | |
| FOR INTERNAL USE ONLY Approved(Yes/No) | | | |
| Company Stamp | HR Siganture | | |
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