



Garden Route District Municipality
 Head Office, 54 York Street, George, 6530 | PO Box 12, 6530, Tel nr: (044) 803 1300

BURSARY APPLICATION FORM

(This form must be completed in writing by the applicant)

PART A: PERSONAL PARTICULARS													
Surname:							Title	Mr		Mrs		Miss	
First Names:													
Identity Nr.:													
Date of birth:	Y	Y	Y	Y	M	M	D	D					
<p>• Attach a certified copy of your identity document</p> <p>• For the purpose of monitoring employment equity in terms of bursaries, it would be appreciated if you provide information regarding your race, gender and if you have any disabilities.</p>													
Gender:	Male		Female		Disability (Specify)								
Race:	Asian		African		Coloured		White		Other				
Permanent residential address <i>(attach proof of permanent residential address)</i>													
	Postal code												
Address at which you can be contacted at all times													
	Postal code												
Permanent address if different from residential address													
	Postal code												

(Attach official proof of results from institution)	
Course to be enrolled for in	
Name of institution	
Total (all inclusive) costs of studies for	
Subjects enrolled for	
(Attached proof of registration and cost)	

PART E: GENERAL INFORMATION			
Have you received a bursary from the Garden Route District Municipality in the past?	YES		NO
What would you consider special achievements obtained to date?			
List extra-mural activities in which you participate (including sport and community involvement):			
List your hobbies:			
Please motivate why you have chosen this course of study:			
What personal qualities do you consider necessary to be successful in the career which you have chosen?			

PART F: REFERENCES			
Please provide the names of TWO teachers/lecturers/tutors to whom you are well-known and whom the Garden Route District Municipality may contact:			
Name		Telephone	
Name		Telephone	

I understand that any false or misleading information furnished on this bursary application form or in connection with this bursary application may result in rejection of the application or if already awarded a bursary by the Garden Route District municipality in the withdrawal thereof and recovery of all monies already paid.

Signature		Date	
Signature of guardian (in the case of minor)		Date	

PLEASE NOTE

No late applications will be considered. Applications will not be acknowledged in writing and copies of supporting documents will not be returned.