



## MARULENG LOCAL MUNICIPALITY

2023 ACADEMIC YEAR

# Community Bursary Application Form

- Please use a black pen
- Mark with an X where applicable

### SECTION A: PERSONAL DETAILS

SURNAME: \_\_\_\_\_

FULL NAMES: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

IDENTITY NUMBERS: \_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_

RACE: BLACK ( ) ASIAN ( ) COLOURED ( ) WHITE ( ) OTHER ( )

GENDER: MALE ( ) FEMALE ( )

DISABILITY: YES ( ) NO ( )

IF YES PLEASE SPECIFY: \_\_\_\_\_

HOME LANGUAGE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

WARD NUMBER: \_\_\_\_\_

CELL PHONE NUMBERS: \_\_\_\_\_

E-mail: \_\_\_\_\_

**SECTION B: DETAILS OF PARENT OR GUARDIAN**

SURNAME: \_\_\_\_\_

FULL NAMES: \_\_\_\_\_

MARITAL STATUS: SINGLE ( ) MARRIED ( )

IDENTITY NUMBERS: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

WORK PHYSICAL ADDRESS: \_\_\_\_\_

WORK TELEPHONE NUMBER: \_\_\_\_\_

CELL PHONE NUMBERS: \_\_\_\_\_

NUMBER OF DEPENDANTS: \_\_\_\_\_

COMBINED MONTHLY HOUSEHOLD INCOME: \_\_\_\_\_

**SECTION C: EDUCATION**

NAME OF SCHOOL/TERTIARY INSTITUTION: \_\_\_\_\_

GRADE 12 ( ) TERTIARY YEAR ( )

PHYSICAL ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

RECENT RESULTS: Please attach certified copy of your most recent academic record.

**SECTION D: CURRENT/DESIRED FIELD OF STUDY AT TERTIARY**

NAME OF INSITUTION: \_\_\_\_\_

BACHELORSS DEGREE/DIPLOMA/CERTIFICATE: \_\_\_\_\_

FIELD OF STUDY: \_\_\_\_\_

PROVISIONAL/STUDENT NUMBER: \_\_\_\_\_

**SECTION E: DECLARATION**

I the undersigned, declare that the information given is correct and understand that should I receive a bursary, I will fully comply with all provisions of the Maruleng Community Bursary 's terms and conditions.

\_\_\_\_\_

SIGNATURE

\_\_\_\_\_

DATE

**NOTES:**

Please ensure that you have included the following attachments:-

- Certified copy of results.
- Provisional Admission Letter or Proof of Registration.
- Proof of Parent/Guardian's income.
- Proof of Residence.

Closing date for submission is 13 January 2023, completed form must be sent to:

The Municipal Manager

Maruleng Local Municipality

P.O. Box 627

Hoedspruit

1380

Or alternatively be hand delivered at office No: 09, 64 Springbok street, Hoedspruit, 1380 from 08h00 – 16h00.