



## Bursary Application Form for Full Time Department of Transport Bursaries

#### **INSTRUCTIONS:**

- 1. Read carefully before completing, signing, or submitting this form.
- 2. Ensure that this form is completed in full.
- 3. Complete in BLOCK LETTERS.
- 4. Note that this bursary cannot be used to pay for existing loans or debts.
- 5. Ensure that this form is duly signed.
- 6. Application forms with incomplete information will be disqualified.
- 7. Application forms with incorrect information will lead to your application being disqualified.
- 9. Attach All of the following **Required** documents:
  - 9.1 Certified copy of a valid Senior certificate (if you have completed Grade 12).
  - 9.2 Certified copy of the latest academic transcript or record on official letterhead or logo (if you are already at university).
  - 9.3 Certified copy of a valid South African identity document (less than six months certified)
  - 9.4 Salary Advice of the person responsible for your needs.
- 10. Applications received after the closing date will not be considered.

#### **CRITERIA:**

- 1. The bursary covers the unemployed youth under the age of 35.
- 2. Only students registered for the following qualifications will be considered:
  - a. BCom Transport Economics
  - b. BCom Logistics
  - c. Diploma in Civil Engineering
  - d. Advance Diploma in Civil Engineering
  - e. Honours Transport Economics
  - f. Honours Logistics
- 3. Should a recipient fail to successfully complete his/her studies, UNISA reserves the right to cancel the awards made throughout the years.
- 4. Successful students will be selected by a selection committee.
- 5. All Bursary returning Students must have passed 50% or more of their previous registered modules to be considered for new intake/funding.
- 6. All returning students must apply for funding.
- 7. All applications must be sent to <u>makgarc@unisa.ac.za</u>

### **Department of Transport Application Form**

## 2024 Application for DOT Bursary closing date: 3 February 2024

Diploma	Yes		egree	Yes	No	F	ile no (fo	or Offi	ce use only)						
Application period 1	November 2023 - 3	3 Febi	ruary 2024												
*Only one application	n per academic year	and	Only SA citi	zens ne	ed apply										
				FO	R OFFICE US	E ONL	Y								
Total annual income				Numbe	r of lawful H	і/н			Number o	of tert	iary st	udents			
Remaining term of s	entence														
Comments															
Application form acc	epted by							Scre	ened by						
Personal particu															
Title		In	itials			Sur	name								
Identity number								Stı	ident no						
								5.0							
Do you have any other forms of funding?     Yes     No   If yes, please state the sponsor															
State your highest qualification     Name of institution       Year of completion															
Are you under financial administration order (insolvency) for unpaid debt?															
Have you been declared mentally unfit by a court of law to enter into any legal agreement?															
Marital status	Single		Married	lfr	narried					,	Widov	wed	Div	vorced	
				In	community	of pro	perty								7
				An	te nuptial co	ontrac	t (ANC)								
				Pre	enuptial con	tract (	PNC)								
*Please supply us wit	h an applicable cert	tified	copy: marr	iage cer	tificate, AN	C, PNC	, death	certifi	cate (widov	wed),	divor	ce decre	e		
Prison student	Yes				the prisone ng years to l			n auth	orities indi	cating	term	of sente	ence, y	ears alre	eady
. Employment de	tails														
Are you employed?														Yes	No
If yes, please comp	lete section 2.1. If	f no,	please cor	nplete	sections 3	or 3.:	l.								
	employment deta	ails (a	attach cert	ified p	roof of inc	ome r	not olde	er tha	n three m	onth	s)				
Name of employer															
Address															
Tel number					D.d										
Salary	Wages		Other	-	Monthly										
					Weekly										

# \*If married please complete section 3.1 with spouse's employment details

#### 3. Details of parent/s for a dependant's application

• Please attach certified copies of ID, death certificate or divorce decree. If one or both parents are unknown, the guardian must confirm this in an affidavit (not the student).

• Please attach latest pay slip if employed, last 3 months' bank statements and an affidavit if self-employed or unemployed.

		Father	Mother
Name & Surname			
ID number			
Residential address			
Employer's name			
Employer's address			
Employer's Tel number			
	Salary		
Type of Income	Wages		
rype of income	wages		
	Other		
	Other		

#### 3.1 Legal guardian/spouse (please attach latest pay slip if employed, last 3 months' bank statements and an affidavit if selfemployed or unemployed)

Name & Surname			Type of Income						
ID number				Colony	Monthly				
Residential Address       Employer/s name			T	Salary	Weekly				
					Monthly				
			Type of income	Wages	Weekly				
Employer's address				Other	Monthly				
Employer's Tel number				Other	Weekly				

#### 4. Particulars of next of kin: mother, father, sister, brother, cousin, partner, aunt or uncle

Surname		Initials		Title				
Relationship to app	blicant							
Postal address								
Telephone numbe	r		Cell number					

#### 5. Particulars of lawful household (e.g., parent/s, guardian, other dependents starting with applicant):

- NB: Please use a separate page if space provided below is insufficient
- Attach certified copies of RSA identity documents or birth certificates of all members of lawful household

Name	Surname	ID Number	Relationship to applicant (1)	Age	Currently busy with (2)

- (1) Spouse/partner/brother/sister/daughter/son/uncle/aunt/grandparent/other
- (2) Primary school/secondary school/out of school/unemployed/employed/university (of technology)/FET college/other

• Please attach certified copies of proof of income for employed members of household stated in section 5; excluding members already mentioned in sections 3 and 3.1.

#### 6. Declaration

I declare that I have read and understood the contents of this bursary application form, and information supplied by me is true and correct. I also understand that should any of the information/documents herein be proved to be incorrect or falsified, disciplinary action will be taken against me.

Student's signature

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Date

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