**BURSARY APPLICATION FORM**

**-UNDERGRADUATES STUDIES-**

* Closing Date for bursary application: 31 October of each year
* Give concise answers and where applicable, mark with an **X**.
* Incomplete or late applications will not be considered.
* **Only SA Citizens will be considered**.
* Please forward your applications to our Bursary Department via Email or Fax as follows:

Email: bursaries1@potatoes.co.za or Fax: 086 577 9944

**SECTION A- PERSONAL DETAILS:**

Title………………… Surname…………………………………………………………………….

First Names:…………………………………………………………………………………..........

Identity number:…………………………………………………………………………………….

Race:  **(Please mark with an X)**

|  |  |  |  |
| --- | --- | --- | --- |
| African | Coloured | Indian | White |

Date of birth:………………………………………… Age: ………………………………………..

Male or Female:……………………………………. Home Language:……………………………..

Citizenship:……………………………………………………………………………………………

Marital Status:………………………………………Dependants:………………………….

Physical Street Address: …………………………………………………………………………....

Suburb:………………………………………………………………….............................................

 City: …………………………………………………………………………………………………....

Postal Code:……………………………………………………………………………………………

Telephone No:………………………………………Work……………………………………………

 Cell:……………………………………………………………………………………………………..

Email Address:………………………………………………………………………………………....

Preferred Method of Correspondence: **(Please mark an X next to your choice)**

Email:………………..Post:……………………… Telephone: ………………………………….

Emergency Contact Person:……………………………….Relationship:………………………..

Contact Number:……………………………………………………………………………………..

Where did you hear about Potatoes South Africa’s Bursaries? **(Please mark an X next to your choice)**

Other

Friend

Career Fair

Potatoes SA Website

University Staff/ College Staff

If other, please specify:……………………………………………………………………………..

**SECTION B- DETAILS OF THE UNIVERSITY/ COLLEGE:**

Name of the Institution you are studying at:…………………………………………………………

Physical Address of the institution:…………………………………………………………………

……………………………………………………………………………………………………………

Province:………………………………………………….. Code: …………………………………..

Institution contact Number:…………………………………………………………………………..

Course of Study:……………………………………………………………………………………….

Student Number (if applicable):………………………………………………………………………

Main Subjects:………………………………………………………………………………………………………………………………..

………………………………………………………………………………………………………………………………………………………

Please mark the academic year for which you are applying **(Please mark with an X)**

|  |  |  |  |
| --- | --- | --- | --- |
| **1** | **2** | **3** | **4** |

1. What Agricultural Career do you intend on following on completion of your studies:

………………………………………………………………………………………………………

…………………………………………………………………………………………………………

2. Please tell us why your bursary application should be considered in terms of your academic ability and future career plans.

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**SECTION C: OTHER BURSARIES OR SPONSORS:**

|  |  |
| --- | --- |
| Yes | No |

 Are you at present studying with a bursary?

 If yes, name the bursary:…………………………………………………………………………...

|  |  |
| --- | --- |
| Yes | No |

 Do you have or have you received a study loan?

 If yes, name of the loan:……………………………………………………………………………

 For what purpose: …………………………………………………………………………………..

**SECTION D: DOCUMENTATION**

**Please attach copies of the following:**

* Certified copy of your ID
* Certificates of Qualifications
* Most Recent Academic Transcripts
* Institution Admission Letter
* Any other supporting documents that are relevant to your application

**SECTION E: DECLARATION BY STUDENT**

I declare that I have read the conditions that apply to this award. I acknowledge that I understand and accept these conditions in full, and I agree to abide by them. Furthermore, I hereby confirm that the above information is true and correct.

**NB: Due to the large number of applications we always receive, applicants should deem their applications unsuccessful if they are not contacted by the end of February of the next year.**

**APPLICANT’S SIGNATURE:**……………………………………………… **DATE:** …………………………………….