

**BURSARY APPLICATION FORM 2017**

Sugar Industry Trust Fund for Education

PO Box 700, Mount Edgecombe, 4300

Tel: 031 508 7034 Fax: 031 508 7191

[www.sasa.org.za/sitfe](http://www.sasa.org.za/sitfe)[bursaries@sasa.org.za](mailto:bursaries@sasa.org.za)

- 1 Applicants must be either:
- 1.1 Registered or have applied in the **Faculties of Science, Engineering or Agriculture** at a University, University of Technology or College of Agriculture.
- or*
- 1.2 The **children of a sugarcane farm worker** who is registered or has applied for any field of study at a University, University of Technology or College of Agriculture.
- 2 All applications must reach the South African Sugar Association before or on Wednesday, **30 November 2016**.
- 3 This application form must be completed in full. **PLEASE REFER TO CHECKLIST**
- 4 Do not attach any original certificates or testimonials, as these cannot be returned.
- 5 We reserve the right to withdraw bursaries awarded to students who accept other full bursaries or loans.
- 6 Shortlisting will be done in January 2017. Shortlisted candidates will be required to attend interviews in January and/or February 2017.
- 7 Initial shortlisting will be based on mid-year results of the current year of study.
- 8 Final selection will be based on your final results of your current year of study.
- 9 If you do not hear from us by **31 January 2017**, please consider your application unsuccessful.

**A. PERSONAL DETAILS**SURNAME  TITLE FIRST NAMES MARITAL STATUS Single  Married DATE OF BIRTH IDENTITY NUMBER NAME OF YOUR TOWN 

PROVINCE (Please tick your province)

KwaZulu-Natal province Mpumalanga province Other (specify) **PLEASE TICK THE COURSE YOU WISH TO STUDY OR ARE STUDYING**Mechanical Engineering  Science (specify major(s) ) Electrical Engineering  Agriculture (specify major(s) ) Chemical Engineering  Other (specify) **INSTITUTION(S) APPLICANT REGISTERED WITH OR APPLIED TO****CENTRAL APPLICATIONS OFFICE (CAO) NUMBER (If applicable)****YOUR HOME/PHYSICAL ADDRESS****POSTAL ADDRESS**

CODE

CODE

<b>YOUR CONTACT PHONE NUMBERS</b>	<b>YOUR CONTACT CELLPHONE NUMBER</b>
<b>YOUR CONTACT E-MAIL ADDRESS</b>	<b>ALTERNATIVE E-MAIL ADDRESS</b>
<b>TELEPHONE NUMBER OF RELATIVE</b>	<b>CELLPHONE NUMBER OF RELATIVE</b>
<b>TELEPHONE NUMBER OF A FRIEND</b>	<b>CELLPHONE NUMBER OF A FRIEND</b>

**DO YOU HAVE ANY RELATIVE WORKING FOR THE SUGAR INDUSTRY (MILLING or FARMING)**  
**IF YES, PLEASE ATTACH PROOF (Salary slip or grower code)**

	YES	NO
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**B. CHILD OF SUGARCANE FARM WORKER (If applicable)**  
**IS YOUR MOTHER OR FATHER A SUGARCANE FARM WORKER**

	YES	NO
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**WHAT IS THEIR OCCUPATION OF THE FARM**

**WHAT IS THE NAME OF THE FARM**

**C. HIGH SCHOOL INFORMATION**

**NAME OF SCHOOL**

**TYPE OF CERTIFICATE OBTAINED**  
(if completed grade 12)

**GRADE 12 LATEST RESULTS (final results or June results - attach a copy of the statement or school report)**

	SUBJECTS	RESULTS	
		PERCENTAGE	SYMBOL
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

**D. TERTIARY STUDIES**

**NAME OF INSTITUTION**

**STUDENT NUMBER**

**YEAR OF STUDY IN 2017**

1ST YEAR		2ND YEAR	
3RD YEAR		4TH YEAR	

**NAME OF THE FACULTY** \_\_\_\_\_

**CONTACT DETAILS FOR FACULTY** \_\_\_\_\_

**IF CURRENTLY REGISTERED, PLEASE SPECIFY COURSES**

(Also attach full academic record)

1	6
2	7
3	8
4	9
5	10

**ARE YOU CURRENTLY A BENEFICIARY OF ANY GRANT OR BURSARY?**  YES  NO

**IF YES, PLEASE STATE THE NAME OF THE FUNDER** \_\_\_\_\_

**OBLIGATIONS AND CONDITIONS OF THE EXISTING GRANT OR BURSARY**

**E. FAMILY**

**DETAILS OF PARENTS** (If deceased, please attach copy of death certificate)

**NAME & SURNAME OF YOUR MOTHER** \_\_\_\_\_  
**IDENTITY NUMBER OF YOUR MOTHER** \_\_\_\_\_  
**TELEPHONE NUMBER** \_\_\_\_\_  
**NAME OF EMPLOYER** \_\_\_\_\_  
**ANNUAL SALARY** (attach proof of income) \_\_\_\_\_  
**OCCUPATION** \_\_\_\_\_

**NAME & SURNAME OF YOUR FATHER** \_\_\_\_\_  
**IDENTITY NUMBER OF YOUR FATHER** \_\_\_\_\_  
**TELEPHONE NUMBER** \_\_\_\_\_  
**NAME OF EMPLOYER** \_\_\_\_\_  
**ANNUAL SALARY** (attach proof of income) \_\_\_\_\_  
**OCCUPATION** \_\_\_\_\_

**DETAILS OF LEGAL GUARDIAN**

(To be completed by applicants living or supported by a guardian)

**NAME & SURNAME OF YOUR GUARDIAN** \_\_\_\_\_  
**TELEPHONE NUMBER** \_\_\_\_\_  
**NAME OF EMPLOYER** \_\_\_\_\_  
**ANNUAL SALARY** (attach proof of income) \_\_\_\_\_  
**OCCUPATION** \_\_\_\_\_

**JOINT INCOME OF PARENTS OR GUARDIAN** (Application based on "need" will not be considered unless proof of income is attached)

_____	up to R20 000 per annum	_____	up to R100 000 per annum
_____	up to R40 000 per annum	_____	up to R200 000 per annum
_____	up to R60 000 per annum	_____	up to R300 000 per annum
_____	up to R80 000 per annum	_____	above R400 000 per annum

**OTHER FAMILY MEMBERS**

**DO YOU HAVE SISTERS AND BROTHERS?**

YES	NO
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**HOW MANY DO YOU HAVE?**

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**HOW MANY ARE STILL IN SCHOOL?**

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**F. ADDITIONAL INFORMATION**

**Give details of any activity/project (academic or community work) in which you have done well at school and/or in the community**

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**Have you ever visited a sugar cane farm or sugar mill. If yes, please give details of where, when and what your experience was like.**

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**Have you had a part time job**

YES	NO
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**If yes, please describe your duties and state the name of the company**

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**Have you been involved with any of the SITFE project partners (Please tick)**

Midlands Community College

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CASME

--

PROTEC

--

TREE

--

MiET Africa

--

TUT Engineering Stepping Initiative

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**G. YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS THE INFORMATION DETAILED BELOW IS ATTACHED**

- 1 Latest school progress report, final Grade 12 Statement of Results (if available) **OR** tertiary exam results if already registered at an institution
- 2 Documentation providing proof of sugar industry connection, if connected
- 3 Proof of family income (payslip, pension receipts, affidavit detailing income or unemployment)
- 4 Death certificate if a parent is deceased
- 5 Certified copy of your identity document
- 6 Confirmation of application / registration at an University, University of Technology or College of Agriculture.

I hereby declare that the information contained in this application form is true and correct. In the event of assistance being granted, I am prepared to enter into the required agreement with SITFE in terms of the rules of SITFE bursary scheme.

**Date**

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**Applicant's signature**

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**Guardian's signature**

**(If applicant under 18 yrs)**

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**BURSARY APPLICATION CHECKLIST**  
Sugar Industry Trust Fund for Education  
PO Box 700, Mount Edgecombe, 4300  
Tel: 031 508 7034 Fax: 031 508 7191  
[www.sasa.org.za/sitfe](http://www.sasa.org.za/sitfe)  
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**Please ensure you have completed the application form and attached the following documents:**

√ Tick

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Bursary application form is complete   |
| <input type="checkbox"/> | Full academic record to date or school progress report   |
| <input type="checkbox"/> | Final Grade 12 Statement of Results <b>OR</b> year end results if already registered at an Institution.          |
| <input type="checkbox"/> | Documentation providing proof of sugar industry connection, if connected   |
| <input type="checkbox"/> | Proof of family income (payslip, pension receipts, affidavit detailing income or unemployment)                   |
| <input type="checkbox"/> | Death certificate if a parent is deceased  |
| <input type="checkbox"/> | Certified copy of your South African identity document   |
| <input type="checkbox"/> | Confirmation of application / registration at an University, University of Technology or College of Agriculture. |

**Applicant's signature**