WIPHOLD BURSARY FUND

for aspiring Chartered Accountants, Actuaries and Engineers

APPLICATION FORM



BURSARY SCHEME

Please read carefully before completing and returning application forms

NOTES

- 1. This document is not in any way an agreement or commitment.
- 2. The selection of learners is totally dependent on excellent results obtained and the outcome of the selection process.
- 3. The number of new bursaries available annually will depend on funds available.
- 4. The value of each bursary will vary according to needs and the availability of funds.
- 5. The bursaries are awarded annually. Renewal is at the discretion of the WIPHOLD Bursary Fund. Satisfactory diligence and progress on the part of the student will be taken into account when renewal is considered.
- 6. Successful applicants will be required to enter into an agreement with the WIPHOLD Bursary Fund.
- 7. The closing date for completed applications is 30 November.

IMPORTANT INFORMATION TO BE NOTED BEFORE COMPLETING THE APPLICATION FORM

- 1. The WIPHOLD bursaries are only available for African learners.
- 2. Forms must be completed and returned to WIPHOLD Bursary Fund, P O Box 87277, Houghton, 2041. (BEFORE 30 NOVEMBER).
- 3. Your application form will only be considered if you have at least **70% in Mathematics (NOT MATHS LITERACY)** and English (5 in the NSC Scale of Achievement).
- 4. An aggregate of "A" or "B" are required. An aggregate of "C" will be considered on a case by case basis only.

- 5. The value of the bursary is dependent on availability of funds at the time.
- 6. Successful applicants will be notified in January (after the matric results are known).
- 7. Provisional successful applicants, based on grade 11 final results, will be notified by **30 November.**
- 8. Students will be required to do vacation work or corporate social responsibility activities if and when required by WIPHOLD and its partners. This however is not guaranteed.

THE FOLLOWING MUST BE ATTACHED TO THIS APPLICATION

Failure to provide all required information in this section will jeopardise your application

- 1. Recent photograph.
- 2. Certified copies of:
 - Grade 11 results or Matric results if passed last year;
 - All appropriate testimonials, certificates or supportive documents;
 - A copy of parents/guardian's salary advice
- 3. In your own handwriting on a separate piece of paper briefly answer the following questions:
- a) Why do you wish to become a Chartered Accountant / Actuary / Engineer ? (select one)
- b) What, in your opinion, are the special talents required to succeed as a Chartered Accountant / Actuary / Engineer? (your selection)
- c) Why do you think you can succeed as a Chartered Accountant / Actuary / Engineer ? (your selection)
- 4. Write a short essay on yourself, your family and your future career plans.

| Name of Applicant: | | | | | | | |
|---|---------------------------|---------------------------|-------------------------------------|--|--|--|--|
| CONFIDENTIAL | | | | | | | |
| TO BE COMPLETED BY PARENT OR GUARDIAN | | | | | | | |
| NOTE: The parent/guardian may send the application direct to the WIPHOLD Bursday Fund to maintain confidentiality | | | | | | | |
| 1. Family contribution towards costs? |) | If so, how much | | | | | |
| 2. What is the household income - af | ter tax R | per n | nonth (Father) | | | | |
| | R | per n | nonth (Mother) | | | | |
| то | TAL R | Pleas | e attach copies of recent pay slips | | | | |
| 3. Is there any other person - brothe | r, sister or guardian - v | vho can help? Please giv | e details and amounts | | | | |
| | | R | | | | | |
| | | R | | | | | |
| | | R | | | | | |
| 4. Number of dependants: Children | <u>ו</u> | | Other | | | | |
| Number of dependants at: School | University | Technikon | College | | | | |
| 5. How does the family survive when there is no income? | | | | | | | |
| 6. Personal particulars: Father | | Mother | | | | | |
| Full names : | | | | | | | |
| Training : | | | | | | | |
| Occupation : | | | | | | | |
| 7. Please provide information about r | members of the family | who hold qualifications (| (university/college/technikon) | | | | |
| NAME | RELATIONSHIP | QL | JALIFICATIONS | | | | |
| 1) | | | | | | | |
| 2) | | | | | | | |
| 3) | | | | | | | |
| 8. Please provide any other important information that should be considered: | | | | | | | |
| I declare that the information given is, to the best of my knowledge, correct and true. | | | | | | | |
| | | | | | | | |
| Date | | Signat | ure of Parent of Guardian | | | | |

TO BE COMPLETED BY APPLICANT

| PERSONAL D | ETAILS | | | | | | | |
|---|-----------------------------|--------------------------------------|-----------------|----------------------------|--------------------------------------|--------------------------|--------------------------------------|--|
| [| | | | | | | | |
| Surname: | | | | | | Age | years | |
| Other names: | | | | Home I | anguage: | | | |
| What name do you p | prefer? | | | Nationality: | | | | |
| Residential address: | | | Postal address: | | | | | |
| | | | | | | | | |
| | | Postal code: | | | | Postal | code: | |
| Province: | | | | Province: | | | | |
| Tel. No. Home - Code No. | | | | Email address: | | | | |
| Identity No. | | | | Cell No.: | | | | |
| What is the quickest | way to contact | you if we need to |)? | | | | | |
| Other contact persor | Other contact person - Name | | | Relationship to applicant: | | | | |
| Tel. No. Code No. | | | | Fax No. Code No: | | | | |
| SCHOOL BACKGROUND | | | | | | | | |
| Last school attended Highest level attaine | - | | | | | Town: In what ye | ar? | |
| SU | JBJECT | | | NTAGE %) | NSC SCALE OF ACHIEVEMENT | Usual class | 5 | |
| Subject and 1. | | | | | | position: | | |
| Year-end 2. | | | | | | How many in class? | | |
| Percentage 3. | | | | | | | | |
| (%) | | | | | | | | |
| 5. | | | | | | | | |
| 6. | | | | | | | | |
| 7. | | | | | | | | |
| 8. | | | | | | | | |
| Comparative marks | GRAI Percentage (%) | DE 10 NSC Scale of Achievement | Per | GRAE centage (%) | DE 11 NSC Scale of Achievement | GRA Percentage (%) | DE 12 NSC Scale of Achievement | |
| English | (70) | | | (70) | | (70) | | |

Mathematics

| UNIVERSITY | | |
|---|----------------------------|---|
| Which Universities have you applied to? (You must have applied to at least two.) | | |
| NB: One of these Universities must be th | e closest to your home | |
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| | | |
| | | |
| If you do not get enough funding, how will yo | u cope? | |
| | | |
| Have you applied previously to WIPHOLD for a | a hursan/2 | If yes, in what year? |
| | | If yes, iff what year? |
| | | |
| | | |
| I declare that the information given is, to the l bursary according to this application form. | best of my knowledge, corr | rect and true. I accept the conditions of the |
| bursary according to this application form. | | |
| | | |
| | | |
| | | |
| Date | | Applicant's signature |
| | | |
| | Attach a recent | |
| | passport size | |
| | photograph of applicant | |
| | appricant | |
| | | |
| RETURN COMPLETED FORM 1 | го: | |
| WIPHOLD Bursary Fund P O Box 87277 | | |
| Houghton | | |
| 2041 | Quinhold corr | |
| fjabetla@wiphold.com or ntlhaboloa | @wipnoia.com | |
| Closing date: 30 November. | | WIPHOLD |