BURSARY APPLICATION FORM 2025

Sugar Industry Trust Fund for Education PO Box 700, Mount Edgecombe, 4300

Tel: 031 508 7034 Fax: 031 508 7191 www.sitfe.co.za bursaries@sasa.org.za



- 1 Applicants must be:
- 1.1 Registered or have applied in the Faculties of Science, Engineering or Agriculture at a University, University of Technology or College of Agriculture. AND
- 1.2 "Missing Middle" applicants whose family combined income is between R350 000 to R600 000, from sugarcane growing areas.
- 2 The children of a sugarcane farm worker can apply and/or be registered for any field of study at a University, University of Technology or College of Agriculture and need not be missing middle applicants.
- 3 All applications must reach the South African Sugar Association before or on Monday, 18 November 2024.
- This application form must be completed in full. PLEASE REFER TO CHECKLIST.
- 5 Do not attach any original certificates or testimonials, as these cannot be returned.
- 6 We reserve the right to withdraw bursaries awarded to students who accept other full bursaries or loans.
- Shortlisting will be done in first week of December 2024. Shortlisted candidates will be required to attend interviews in mid December 2024.

8 Initial shortlisting will	be based on your Gi	rade 11 final resul	ts and Grad	le 12 June results	s or latest Tertiary res	ults.
9 Final selection will be	based on your final	Matric results.				
10 If you do not hear from	m us by 31 January 2	2025, please consi	ider your ar	plication unsucc	essful.	
A. PERSONAL DETA	ILS					
SURNAME		TITLE				
		J				
FIRST NAMES						
MARITAL STATUS	Single		Marr	ried		
DATE OF BIRTH						
IDENTITY NUMBER						
NAME OF YOUR TOWN		PROVINCE (Plea	-	province)		
		KwaZulu-Natal p				
		Mpumalanga pro	ovince			
		Other (specify)				
PLEASE TICK THE COURSE YO	OU WISH TO STUDY	OR ARE STUDYIN	IG			
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 OF	FICE (CAO) NUMBEI	R (If applicable)				
YOUR HOME/PHYSICAL ADD	DRESS	, r	POSTAL AD	DRESS		
		J				
CODE	\neg		CODE			
CODE			CODE			

YOUR CONTACT PHONE NUMBERS	1	YOUR CONTAC	T CELLPHONE NUM	BER
YOUR CONTACT E-MAIL ADDRESS]	ALTERNATIVE	E-MAIL ADDRESS	
TELEPHONE NUMBER OF RELATIVE]	CELLPHONE NU	JMBER OF RELATIV	E
TELEPHONE NUMBER OF A FRIEND]	CELLPHONE NU	JMBER OF A FRIEND)
DO YOU HAVE ANY RELATIVE WORKING FOR TI IF YES, PLEASE ATTACH PROOF (Salary slip or gi		TRY (MILLING o	or FARMING) YES	NO
B. CHILD OF SUGARCANE FARM W IS YOUR MOTHER OR FATHER A SUGARCANE FA	ARM WORKER		l	Luc
IF YES, PLEASE ATTACH PROOF (Salary slip or gi WHAT IS THEIR OCCUPATION AT THE FARM	ower code)		YES	NO
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 Jun	e results - attach		catement or school	report)
SUBJECTS 1		PERCENTAGE	LEVEL	
2				
4				
5				
6 7				-
8]
D. TERTIARY STUDIES				
NAME OF INSTITUTION				
STUDENT NUMBER				
YEAR OF STUDY IN 2025 1ST YEAR 3RD YEAR			2ND YEAR 4TH YEAR	
	-	1		

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CONTACT PERSON AT INSTITUTION				
	L			
HIS/HER CONTACT DETAILS				
IF CURRENTLY REGISTERED, PLEASE SPECIFY C	OURSES			
(Also attach full academic record)	1			
1	6			
2	7			
3	8			
4 9 9 10 10 10 10 10 10 10 10 10 10 10 10 10				
3	10			
ARE YOU CURRENTLY A BENEFICIARY OF ANY	GRANT OR BURSARY?	YES	NO	
			100	
IF YES, PLEASE STATE THE NAME OF THE FUNI	DER			
OBLIGATIONS AND CONDITIONS OF THE EXIST	TING GRANT OR BURS	ARY		
E. FAMILY				
DETAILS OF PARENTS (If deceased, please atta	ch copy of death certif	icate)		
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 suppo	rted 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 (A	nnlication based on "a	ood" will not be conside	ared unless	
proof of income is attached)	ippiication based on Ti	eeu wiii not be conside	ireu uilless	
up to R350 000 per annum		un to DE00 (000 per annum	
up to R400 000 per annum	 		000 per annum	
up to R450 000 per annum	 		000 per annum	
ן ווועווועווו		Tab to wood t	700 per armam	

Date Applicant's	signature		Guardian's signa	
I hereby declare that the information conta assistance being granted, I am prepared to rules of SITFE bursary scheme.				
registered at an institution. 2 Documentation providing proof of su 3 Proof of family income (pay slip, pen 4 Death certificate if a parent is decean 5 Certified copy of your identity docum 6 Confirmation of application / registra	sion receipts, a sed. nent.	ffidavit detailing incom	ne or unemploym	
G. YOUR APPLICATION WILL NO DETAILED BELOW IS ATTACH 1 Final Grade 12 Trial and Matric State	HED			
How did you hear about the bursary?				
PROTEC		Izingolweni Sci	ence Centre	
Rally to Read		MiET Resource		
Have you been involved with any of the Si	TFE project par	KZN science Ce		
If yes, please describe your duties and sta	te the name of	the company		
Have you had a part time job	YES	NO]	
when and what your experience was like.				
Have you ever visited a sugar cane farm o	r sugar mill. If y	yes, please give detail:	s of where,	
at school and/or in the community	inic or commu	inty work) in which you	u nave done wen	
F. ADDITIONAL INFORMATION Give details of any activity/project (acade		situ wark) in which yo	u baya dana wall	
HOW MANY ARE STILL IN SCHOOL?			J	
HOW MANY DO YOU HAVE?		•]	
DO YOU HAVE SISTERS AND BROTHERS?	YES	NO]	
OTHER FAMILY MEMBERS				



		ICATION CHECKLIST
		rust Fund for Education unt Edgecombe, 4300
		4 Fav: 031 F09 7101
	sitfe.co.za	SUGAR INDUSTRI
<u>bursar</u>	ies@sasa.c	org.za
Dlaga		very have completed the confication forms and attached the following decreases.
Pieas	e ensure y	you have completed the application form and attached the following documents:
	√	Tick
		Bursary application form is complete
[Full Tertiary academic record to date or Grade 12 Trial results and Matric certificate
-		Documentation providing proof of sugar industry connection, if connected
ŀ		Proof of family income (pay slip, pension receipts, affidavit detailing income or unemployment) Death certificate if a parent is deceased
ŀ		Certified copy of your South African identity document
ŀ		Confirmation of acceptance at a College of Agriculture or University
•		-
Disclai	imer: SITFE	E shall have a right to reconsider the awarding of the bursary based on affordability.
	Applicant's	s signature
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