INSTRUCTIONS REGARDING THIS BURSARY APPLICATION FORM:

- Closing date for the bursary applications is 02 July 2019
- Use block letters to complete the application form
- Give concise answers and where applicable mark with X
- Attach ALL REQUESTED certified copies
- Incomplete or late applications will not be considered

Please tick the field of study you are applying for in the block below:

- (N4-N6) or National Diploma, B-Tech or B degree in Electrical/Electronic Engineering
- (N4-N6) or National Diploma, B-Tech or B Degree in Mechanical Engineering
- B Degree in Aeronautical Engineering
- B Degree in Marine Engineering
- National Diploma, B-Tech, Advanced Diploma or B degree in Logistics Management
- National Diploma, B-Tech, Advanced Diploma or B Degree in Road Transport Management
- National Diploma, B-Tech, Advanced Diploma or B Degree in Supply Chain Management including Warehouse, Storage and Distribution
- National Diploma, B-Tech, Advanced Diploma or B degree in Transportation Management
- National Diploma, B-Tech, Advanced Diploma or B degree in Transport Economics
- Commercial Divers, Class II,III and IV
- National Diploma, B-Tech, Advanced Diploma or B Degree: Maritime or Nautical Studies
- B Degree Maritime Law
- Masters Degree in Transport Related possible themes in the guidelines
- Commercial Pilot License
- Instrument Rating
- Instructor’s Rating
- CPL with ATPL subjects (Frozen ATPL)
### A. PARTICULARS OF THE APPLICANT

Title: 
Surname: 
First Names: 
Gender: 
Identity Number: 
Race: 
Nationality: 
Province: 
Municipality: 
Last High School Attended: 
Do you have a disability? 
Describe the type of disability: 
Marital Status: 
Home Language: 
Postal Address: 
Residential Address: 
Postal Code: 
Cell phone No: 
Telephone No: (H) 
Email:
B. PARTICULARS OF CURRENT STUDIES FOR WHICH YOU WISH TO RECEIVE A BURSARY

<table>
<thead>
<tr>
<th>TVET (Previously known as FET)</th>
<th>EXTENDED PROGRAMME</th>
<th>DIPLOMA/NATIONAL DIPLOMA</th>
<th>BACHELORS DEGREE</th>
<th>B-TECH/ADVANCED DIVING</th>
<th>PILOT TRAINING</th>
</tr>
</thead>
</table>

(Please tick where applicable)

Student/License Number: ........................................................................................................................................

At which institution are you studying? ................................................................................................................................

Name of the Qualification: ........................................................................................................................................

Major / main subjects: ...................................................................................................................................................

Please indicate your year of study in 2019 (Academic Year):

<table>
<thead>
<tr>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
<th>4th</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>N4</td>
<td>N5</td>
<td>N6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

C. EDUCATIONAL QUALIFICATIONS (COMPULSORY)

<table>
<thead>
<tr>
<th>Name of Qualification</th>
<th>Year obtained</th>
<th>Full-time / Part-time</th>
<th>Name of institution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NB: CERTIFIED COPIES OF ACADEMIC RECORDS OR CERTIFICATES MUST BE ATTACHED FOR ALL QUALIFICATIONS LISTED ABOVE.

D. OTHER BURSAIES, SPONSORS AND DONORS

Do you have an existing bursary?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

If yes, please specify: ........................................................................................................................................

Annual value of the bursary: ..................................................................................................................................
E. COST OF STUDY

Tuition fees including textbooks (TOTAL): R……………………………………………………………………………………………

Accommodation fees required? Yes No (Circle where applicable)

Tuition Cost (PLEASE INDICATE AMOUNT OF FUNDING REQUIRED AGAINST EACH ACADEMIC YEAR WHERE APPLICABLE)

1st Year: R …………………………………………………………………………………………………………………………………

2nd Year: R …………………………………………………………………………………………………………………………………

3rd Year: R …………………………………………………………………………………………………………………………………

4th Year: R …………………………………………………………………………………………………………………………………

Other: R …………………………………………………………………………………………………………………………………

Accommodation: R……………………………………………………………………………………………………………………

TOTAL COST REQUIRED: R………………………………………………………………………………………………………………

F. DETAILS OF PARENT / GUARDIAN (person responsible for your studies)

Title: ..................................................................................................................................................................................

Surname: ........................................................................................................................................................................

Initials: ...........................................................................................................................................................................

Relationship: ...............................................................................................................................................................;

Postal Address: ............................................................................................................................................................

Residential Address: ........................................................................................................................................................

Postal Code: ............................................................................................................................................................... Postal Code: ................................

Cell phone No: ..............................................................................................................................................................

Telephone No (h): ...........................................................................................................................................................

Telephone No (w): ..........................................................................................................................................................

Fax No: ...........................................................................................................................................................................

Email: ...........................................................................................................................................................................

Father’s occupation.........................................................................................................................................................

Mother’s occupation.......................................................................................................................................................;

Guardian’s occupation....................................................................................................................................................
Mark your father’s monthly income group:

- <R2 500
- R2 501 – R5 000
- >R5 000

Mark your mother’s monthly income group:

- <R2 500
- R2 501 – R5 000
- >R5 000

Mark your guardian’s monthly income group:

- <R2 500
- R2 501 – R5 000
- >R5 000

How many other dependants are still at home? ..........................................................

Number of dependants at tertiary institution................................................................

Number of dependants still at school...........................................................................

G. REQUIRED DOCUMENTS (COMPULSORY)

Please attach the certified copies of the following: (Date stamp not older than 3 months)

- Certified Identity copy of applicant
- Certified Identity copy/copies of (both parents or guardian)-where applicable
- Certified Copies of the qualifications or certificates
- Recent academic record/results
- Private Pilot License (PPL) - (Pilots only)
- Admission letter/Proof of registration/proof of application to the institution (if not currently registered).
- Family income if parents are employed or affidavit if not employed
- Quotation of fees, books, accommodation etc
- Valid proof of accreditation by the relevant authority/body for study applied for (Only applicable of Private Institutions)

Kindly note that successful candidates will be expected to sign a bursary contract

H. TERMS AND CONDITIONS

Read these conditions carefully, and if you agree with them, sign the declaration

1. The bursary is only awarded to South African citizens
2. The bursary will only be awarded to the fields of study indicated on Page 1 of this document.
3. TETA will use e-mail or SMS to communicate with prospective bursars. (Bursars will be expected to have an e-mail address and if possible a cell phone contact for SMS purposes)
4. People living with disabilities and from disadvantaged background are encouraged to apply
I hereby declare that the information provided in this application is true and correct in every respect. I am aware that failure to render correct information will lead to my application being disqualified. Therefore, should I be awarded the bursary, I will abide by the regulations applicable.

I give consent to TETA that my information can be provided to third party for the intended purpose of my application and pursuit of my studies if approved by TETA.

(Tick in the box)

Signature of applicant: Date:

If still a minor, signature of the parent or guardian Date:

................................................... ..............................................