

DEA APPLICATION FORM FULL-TIME BURSARIES

INSTRUCTIONS REGARDING THIS BURSARY APPLICATION FORM:

- It is not for DEA staff members
- · Closing date for the bursary applications will be stated on the advert
- Use block letters to complete the application form
- Give concise answers and where applicable mark with X
- · Attach certified copies as indicated in section H
- Provide detailed motivation on section G
- Incomplete or late applications will not be considered
- Applications can be forwarded to :

The Director General Private Bag X 447 Pretoria 0001

For attention: Learning and Development - Bursary Section

How did you hear about the DEA bursaries?

Newspaper	University staff	Friends	Internet	Career Awareness	Other, specify
					=

A, PA	RTICULARS	OF THE AP	PLICANT							
Title:		Surname:								
First Names	5'						 		*************	
Gender:										å
Male	Female								in F	
Identity Nun	nber:									,
						6				
Race:										
African	Coloured	Indian	White							
		L								1
Nationality: .						**********	 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			.,,,,,,,,
Province:						,,,,,,,,,,,,	 · · · · · · · · · · · · · · · · · · ·			
Do you have	a disability?									
Yes	No									
Marital Statu	s:			Но	me I ar	nullana.	2			
Postal Addre						al Addre		***************************************	***********	,.,
				110	Sideritia	2				
0 %		***************************************								

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						 		••••••	
	4444444444444			Pos	tal Code	e:				
	0					-				
• • • • • • • • • • • • • • • • • • • •	o: (h) (
	o: (w) (
)							***************************************	****	
	,,,,,,,,,,							<i>=</i>		

PLOMA	B-TECH	HONOURS	MASTERS	DOCTRATE
ent Number:	1		2 A	a
hich institution a	are you studying?			
me of the Qualific	cation			
or / main subject	s	····		
rk the academic	year for which you are ap	oplying for:		
1	2 3	4		
			AND THE PARTY OF T	
	* * * * * * * * * * * * * * * * * * * *			
	ch proposal. Indicate the o honours and masters)	problem statement and th	ne importance of you	ır study (research
		problem statement and the	ne importance of you	ır study (research
		problem statement and the	ne importance of you	ır study (research
		problem statement and the	ne importance of you	ır study (research
		problem statement and the	ne importance of you	ır study (research
		problem statement and the	ne importance of you	ır study (research

C. EDUCATIONAL QUALIFICATIONS

Name of Qualification	Year of first registration	Year obtained	Full-time / Part-time	Name of institution
				2
			× -	
			, ·	

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

If you are	not currently enrolled at	any educational institution, plea	ase indicate who	at you are doing	at present.
	-	2			
	-				
1.0	17			·	
	3			399	
			: 33		
				12	
100					*

D. OTHER BURSARIE	S, SPONSORS A	ND DON	ORS	
			780	
Do you presently study with	a bursary?	Yes	No	
If yes, what is the name of t	he bursary?	*************		
Annual value of the bursary				
Father's occupation				
Mother's occupation				
Guardian's occupation				
Mark your father's monthly i	ncome group:			7.0
<r2 500<="" td=""><td>R2 501 – R5 00</td><td>00</td><td>>R5 000</td><td></td></r2>	R2 501 – R5 00	00	>R5 000	
Mark your mother's monthly	income group:			
<r2 500<="" td=""><td>R2 501 – R5 00</td><td>0</td><td>>R5 000</td><td>Attach a proof of</td></r2>	R2 501 – R5 00	0	>R5 000	Attach a proof of
Mark your guardian's monthl	ly income group:	0	>R5 000	income or a sworn affidavit
How many other dependants				
Number of dependants at ter				
Number of dependants still a	t school	************		
Do you have or have receive	d a study loan?	Yes	No	
If yes, name of loan				
For what purpose?		•••••	***************************************	
When did you get it?				

For how long are you intending to use it?....

RESEARCH EXPERIENCE AND OUTPUT List all scientific articles/ papers have published and/ or presented and the name of the journal or conference where the article was published or was presented. Article title..... Authors..... Article title Authors..... DETAILS ABOUT PARENTS / GUARDIAN / NEXT OF KIN Title: Surname:..... Initials: Identity Number: Relationship: Postal Address: Residential Address: Postal Code: Postal Code: Cell phone No: Telephone No: (w) (.....)..... Telephone No: (h) (.....).... Email: Fax No: (.....)....

					3		
			, v				
	•						
8							
1 22 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							27
	-0.5		89.99	(5)			
			4				
		:	XISHIJITAN E IFSITAN				
		į.	93	-u distribution			
	, e e						¥.
9		3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
		3 3					
4				-			
					<u></u>		

			2		18	.00	ě
		9		***************************************	-		
			SAME N		T		
				***************************************	*		
	Y						-
							- 10

H. DOCUMENTATION

Please attach the certified copies of the following:

- Identity document
- · Copies of qualifications or certificates
- Recent academic records
- Confirmation of registration if already registered with institution of higher learning
- Family income if parents are employed or affidavit if not employed
- Admission letter
- Research proposal (applicable to honours and masters)

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

I. DECLARATION

I hereby declare that the information provided in this a that failure to render correct information will lead to my awarded the bursary, I will abide by the regulations ap	
Signature of applicant:	Date:
If still a minor, signature of the parent or guardian	Date: