



32 Cowan Close | Stellenbosch Park | Schornville | King William's Town | Eastern Cape  
Private Bag X0023 | Bhisho | 5605 | REPUBLIC OF SOUTH AFRICA  
Tel: 043 604 7400 | Website: www.ectransport.gov.za

**BURSARY APPLICATION FORM FOR FULL TIME HIGHER EDUCATION STUDY 2024 ACADEMIC YEAR**

<b>NAME AND SURNAME</b>	
<b>CONTACT DETAILS</b>	

**Important :**

- a) Please **PRINT** when completing the form (**BLACK INK**)
- b) Mark appropriate blocks with an "X"
- c) This Bursary is intended for the unemployed youth between 18 and below 35 of age
- d) Applicants must be South African citizen residing in the Eastern Cape
- e) Failure to complete the form fully and correctly will disqualify the application.
- f) Late applications will not be considered
- g) Checklist of documents to be submitted

<b>Certified Documents attached</b>	<b>Tick</b>
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ID Copy	
Matric or equivalent certificate	
Admission letter from the intended recognized higher institution	
Proof of Income (Pay slip) or sworn affidavit (if parents are not working or self-employed for both parents or Legal guardian	
Proof of residence, please attach municipality bill	
Motivation letter from the Applicant	

**NB: CLOSING DATE: 28 FEBRUARY 2024**



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**SECTION B: EDUCATION DETAILS**

18.(a) Year Matric Passed \_\_\_\_\_

(b) Currently studying: Qualification \_\_\_\_\_

(c) Present year of study: e.g. 1<sup>st</sup> year, 2<sup>nd</sup> Year \_\_\_\_\_

(d) Student number \_\_\_\_\_

**SECTION C: DELARATION BY APPLICANT**

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- I have attached /enclosed all necessary supporting documentation as requested
- I realize that failure to complete the form and /or withhold information and / or to supply requested documentation and /or results can lead to disqualification of the applicant.
- I declare that the above information is complete and correct

Signature

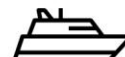
Initial

Date

\_\_\_\_\_

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