



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 2023 ACADEMIC YEAR

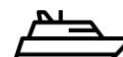
NAME AND SURNAME	
CONTACT DETAILS	

Important :

- a) Please **PRINT** when completing the form (**BLACK INK**)
- b) Mark appropriate blocks with an "X"
- c) This Bursary is intended for the youth between 18 and 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

Certified Documents attached	Tick ✓
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 : 10 MARCH 2023



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SECTION A: DETAILS OF THE APPLICANT AND PLANNED COURSE OF STUDY

1. Identity number															Attached a certified copy	2. Date of Birth	D/M/Y	3. Language		
4(a) Surname																		4(b) Title		
5 First Names																				
6 Present Postal address											8. Permanent address									
	Postal Code										Postal code									
7 Telephone number											9. Telephone number									
	(Code)										(code)									
10 Cell phone number											11. Email address:									
											<i>Note: Section 14 included in terms of the Employment Equity Act of 1998 No 55 of 1998 its definition of the designated group</i>									
12(a) Are/ were you in receipt of another state bursary/loan											13(a)	MALE	FEMALE							
											14(b) BLACK	COLOURED	INDIAN	WHITE						
											14(c) Disability	YES	NO							
											If "Yes" Furnish particulars									
											15. Name of degree/ Diploma for which bursary is needed									
											16. At which Institution /University are you / do you intend studying?									
											17. For how many years do you need the bursary? ____yrs									

YES

Ja

NO

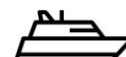
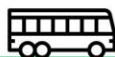
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If "Yes" Furnish particulars below

13(b) Name of Authority _____

Nature of Obligations _____ and _____

Fulfillment of Obligations _____



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SECTION B: EDUCATION DETAILS

18.(a) Year Matric Passed _____

(b) Currently studying: Qualification _____

(c) Present year of study: e.g. 1st year, 2nd Year _____

(d) Student number _____

SECTION C: DELARATION BY APPLICANT

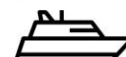
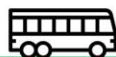
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- I have attached /enclosed all necessary supporting documentation as requested
- I realize that failure to complete the form and /or withhold information and / or to supply requested documentation and /or results can lead to disqualification of the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

Signature

Initial

Date



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