



merSETA
MANUFACTURING, ENGINEERING
AND RELATED SERVICES SETA

BURSARY APPLICATION FOR STUDY AT POST-SCHOOL EDUCATION AND TRAINING INSTITUTION

1. PERSONAL PARTICULARS									
Surname				Full Names					
Course of Study									
Name of Institution where Studies will be taken									
Full Title of the Qualification or Part - Qualification									
SAQA Registration ID Number									
Residential Address									
Province				City					
Municipality					Postal Code				
Geographic Location				Please tick (√) or cross (×) relevant option					
				Urban			Rural		
Do you have any disabilities?									
If yes, please specify the type of disability									
Cell Number				Email Address					
Specify Language				Please tick (√) or cross (×) relevant option					
				Speak		Read		Write	
				Speak		Read		Write	
				Speak		Read		Write	
				Speak		Read		Write	
Identification Number									

Document Title	Bursary Application Form to Study at Post-School Education and Training Institution		
Document Number	BUR-FM-004	Revision Date	29 April 2024
Page Number	Page 1 of 3	*Next Revision Date	31 March 2030
Revision Number	Rev 08	Access	Controlled
Reviewed: Acting Senior Manager: Learning Programmes & QA		Approved: Acting Chief Executive Officer	

Please tick (✓) or cross (×) relevant option										
Title	Mr.		Mrs.		Ms.		Dr		Prof	
Gender	Female				Male					
Race	African		Colored		Indian		White			
Year of Study	Please tick (✓) or cross (×) relevant option									
	First Year of Study		Continuation of Studies		Completion of Studies					
Full Name and Surname of Parent if the applicant is a minor under the age of 21 years.										

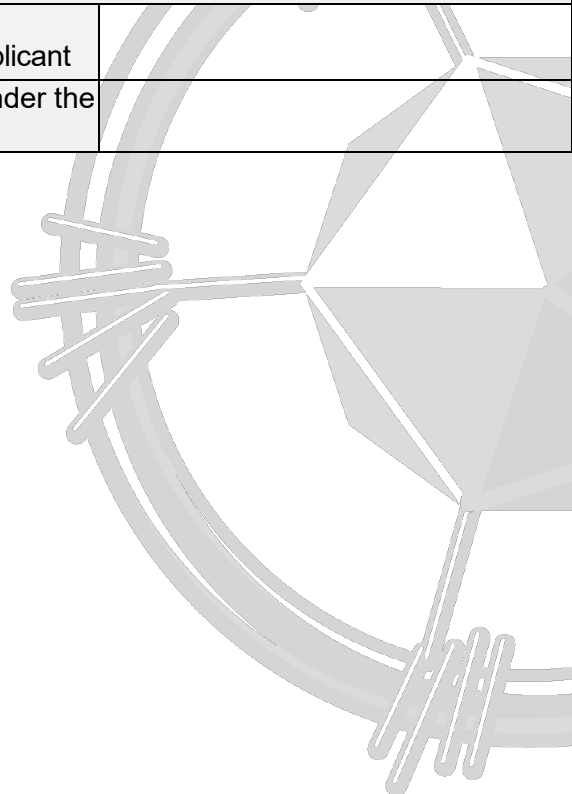
2.	EDUCATION: PARTICULARS OF SECONDARY SCHOOL(S) ATTENDED BY APPLICANT		
2.1	NAME OF SCHOOL	YEARS OF ATTENDANCE	
		FROM (In Years)	TO (In Years)
2.2	SCHOOL RECORD		
Certificate obtained at Grade 12 or equivalent level			
Name of Certificate		Month and year obtained	
If still at school, attach a copy of the latest school report.			
Subjects written in Grade 12 or equivalent examination. Please attach transcripts.			
NB!! PLEASE ATTACH COPIES OF ALL RESULTS			

3.	LOANS, GRANTS, BURSARIES	
Are you in receipt of a grant, loan, bursary, or any other financial assistance for study purposes?		
If yes, please specify the type of funding.		
NAME OF AWARD		AMOUNT (R)
Have you applied for any other loan, grant, or bursary?		
If yes, please specify the type of loan, grant, or bursary applied?		

4.	ATTACHMENTS TO THIS APPLICATION	
Is a copy of the applicant's Identification Card or Green Bar-Coded Identification Document (preferably color, both sides; face, letters, and number need to be clear) attached?		
Is a copy of the latest examination or test results obtained from the university/college/school/ other educational institution attached?		
Is the proof of registration that shows the date and name of the institution attached?		
Is a copy of the latest school report/equivalent and transcripts attached?		
Is there any additional information, proof of award, etc. attached?		

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Are you aware that no faxed documents will be accepted for this application?		
5. DECLARATION		
Are you aware that this application will not be considered unless fully completed?		
Do you declare that the information that you have provided in this application form is, to the best of your knowledge and belief, correct, and complete?		
Do you understand that any false or willfully suppressed information will render this application null and void?		
I hereby provide my consent to the Institution to release my academic information (academic records), proof of registration, and or proof of completion (statement of results or certificate) to the funder to process my bursary application.		
Date		Signature of Applicant
Signature of Parent or Guardian if the applicant is a minor under the age of 21 years.		



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