

Rig alle korrespondensie aan:  
Address all correspondence to:

**WESKUS DISTRIKSMUNISIPALITEIT  
WEST COAST DISTRICT MUNICIPALITY**

Posbus / P O Box 242  
MOORREESBURG 7310

**MUNISIPALE BESTUURDER /  
MUNICIPAL MANAGER**

Navrae / Enquiries: T Steinmann  
Verw. Nr. / Ref. No.: 7/6/1



Telefoon / Phone: (022) 433-8400  
Faks / Fax: (022) 433-8484  
E-pos Adres / E-mail Address:  
[westcoast@wcdm.co.za](mailto:westcoast@wcdm.co.za)

## MUNICIPAL EXTERNAL BURSARY FUND APPLICATION FORM

(PLEASE NOTE: This form must be completed in the own handwriting of the applicant)

PART A: PERSONAL PARTICULARS												
SURNAME						TITLE	MR		MRS		MISS	
FIRST NAMES												
IDENTITY NUMBER											AGE	
(Attach an originally certified copy of your identity document)						DATE OF BIRTH						
For the purpose of monitoring employment equity in terms of bursaries, it would be appreciated if you would provide information regarding your race, gender and disability.												
GENDER	MALE		FEMALE		DISABILITY (Please specify)							
RACE	ASIAN		AFRICAN		COLOURED		WHITE		OTHER			
PERMANENT RESIDENTIAL ADDRESS (Attach proof of permanent residential address)					POSTAL CODE							
ADDRESS AT WHICH YOU CAN BE CONTACTED AT ALL TIMES					POSTAL CODE							
PERMANENT ADDRESS IF DIFFERENT FROM RESIDENTIAL ADDRESS					POSTAL CODE							
HOME TELEPHONE NUMBER					CELLULAR NUMBER			ALTERNATIVE NUMBER				
ANY RELATIONSHIP WITH AN EMPLOYEE(S) OF THE WEST COAST DISTRICT MUNICIPALITY												
YES		NO		1.								
IF YES, NAME OF EMPLOYEE(S)				2.								
ANY RELATIONSHIP WITH A COUNCILLOR(S) OF THE WEST COAST DISTRICT MUNICIPALITY												
YES		NO		1.								
IF YES, NAME OF COUNCILLOR(S)				2.								

PART B: HOUSEHOLD CIRCUMSTANCES			
<b>MONTHLY HOUSEHOLD INCOME</b> (Attached originally certified true copies of payslips of at least three (3) months or sworn affidavits)			
R0 – R2,500	R2,501 – R5,000	R5,001 – R7,500	R7,501 – R10,000
R10,001 – R12,500	R12,501 – R15,000	R15,001 – R17,500	R17,501 and more
STATE NUMBER OF PERSONS DEPENDANT ON THE MONTHLY HOUSEHOLD INCOME			
PART C: COMPULSORY EDUCATIONAL INFORMATION			
SUBJECTS OF HIGHEST STANDARD PASSED			SYMBOLS OBTAINED
(Attach originally certified true copy of results)			
POST SCHOOL QUALIFICATIONS			
NAME OF INTITUTION			
STUDY COURSE			
SUBJECTS ALREADY PASSED		YEAR IN WHICH SUBJECTS WERE PASSED	
(Attach originally certified true copy of results)			
PART D: BURSARY PARTICULARS			
STUDY COURSE BURSARY IS APPLIED FOR			
DURATION OF STUDY COURSE			
NAME OF EDUCATIONAL INSTITUTION AT WHICH YOU ARE OR WILL BE STUDYING			
TOTAL ANNUAL ESTIMATED STUDY FEES		R	
STUDENT NUMBER		ACADEMIC YEAR (e.g. 1 <sup>st</sup> or 2 <sup>nd</sup> )	
STUDY COURSE ENROLLED FOR			
NAME OF EDUCATIONAL INSTITUTION			
REGISTRATION COST (attach proof)		R	
CLASS FEES		R	
COST OF STUDY MATERIAL		R	
OTHER COST (specify)		R	
TOTAL COST		R	
SUBJECTS ENROLLED FOR			
1.		2.	
3.		4.	
5.		6.	
7.		8.	

<b>PART E: GENERAL INFORMATION</b>			
<b>HAVE YOU RECEIVED A BURSARY FROM THE WEST COAST DM IN THE PAST?</b>	<b>YES</b>		<b>NO</b>
<b>DO YOU RECEIVE A BURSARY AND / OR ASSISTANCE FROM ANOTHER INSTITUTION?</b>	<b>YES</b>		<b>NO</b>
<b>IF YES, STATE WHETHER IT IS A FULL BURSARY AND / OR ASSISTANCE</b>	<b>YES</b>		<b>NO</b>
<b>PLEASE MOTIVATE WHY YOU HAVE CHOSEN THIS STUDY COURSE:</b>			
<b>PART F: REFERENCES</b>			
<b>PLEASE PROVIDE THE NAMES OF TWO TEACHERS / LECTURERS / TUTORS TO WHOM YOU ARE WELL KNOWN AND WHOM THE WEST COAST DM MAY CONTACT:</b>			
<b>NAME</b>		<b>TELEPHONE</b>	
<b>NAME</b>		<b>TELEPHONE</b>	
<b>I CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THE SUBMISSION OF FRAUDULENT INFORMATION WILL LEAD TO AUTOMATIC DISQUALIFICATION AND/OR WITHDRAWAL OF ALL FINANCIAL ASSISTANCE GRANTED IN TERMS OF THE EXTERNAL BURSARY FUND, OR A CLAIM THAT ALL FEES BE PAID BACK TO THE WEST COAST DISTRICT MUNICIPALITY. IN APPROPRIATE CASES, THE MATTER MAY ALSO BE REPORTED TO THE SOUTH AFRICAN POLICE SERVICES.</b>			
<b>SIGNATURE</b>		<b>DATE</b>	
<b>SIGNATURE OF GUARDIAN</b> (in the case of a minor)		<b>DATE</b>	

**PLEASE NOTE THAT IN TERMS OF THE APPROVED EXTERNAL BURSARY FUND POLICY OF THE WEST COAST DISTRICT MUNICIPALITY -**

- **The closing date for applications will be regarded as the date on which requirements as stipulated in this Policy should be met by applicants.**
- **Incomplete bursary applications which lack the required supporting documentation, or late applications shall not be considered.**
- **West Coast District Municipality shall not be held responsible for students not being registered, should the process, for any reason whatsoever, be delayed or withdrawn.**
- **Should Council be dissatisfied with a student’s study performance based upon progress reports, it reserves the right to terminate any further payments and to disqualify such a student from future participation in the External Bursary Fund.**
- **Submission of fraudulent information will lead to automatic disqualification and/or withdrawal of all financial assistance granted in terms of the External Bursary Fund, or a claim that all fees be paid back to the West Coast District Municipality. In appropriate cases, the matter may also be reported to the South African Police Services.**
- **Students will be obliged to submit progress reports twice per year at the end of July and November.**
- **Students to whom participation in the External Bursary Fund have been granted will be obliged to sign a Study Agreement (Memorandum of Agreement) with the West Coast District Municipality.**