BURSARY APPLICATION FORM 2023

Sugar Industry Trust Fund for Education

PO Box 700, Mount Edgecombe, 4300 Tel: 031 508 7034 Fax: 031 508 7191



www.sitfe	b.za bursaries@sasa.org.za	
1 " M i	ng Middle" applicants whose family combined income is between R350 000 to R600 000 from	
suga	ane growing areas, will receive preference.	
2 App	ants must be either:	
2.1 Reg	ered or have applied in the Faculties of Science, Engineering or Agriculture at a University, University of	
Tecl	ology or College of Agriculture. OR	
2.2 The	ildren of a sugarcane farm worker who are registered or have applied for any field of study at a University,	
	sity of Technology or College of Agriculture.	
	lications must reach the South African Sugar Association before or on Monday, 31 October 2022.	
	oplication form must be completed in full. PLEASE REFER TO CHECKLIST .	
	attach any original certificates or testimonials, as these cannot be returned.	
	serve the right to withdraw bursaries awarded to students who accept other full bursaries or loans.	
	sting will be done in first week of December 2022 . Shortlisted candidates will be required to attend	
	ews in mid December 2022 .	
	shortlisting will be based on your Grade 11 final results and Grade 12 June results or latest Tertiary results.	
	election will be based on your final Matric results.	
	do not hear from us by 31 January 2023, please consider your application unsuccessful.	
-	ONAL DETAILS	
SURNAME		
FIRST NAM	S	
MARITAL	ATUS Single Married	
DATE OF E	TH	
IDENTITY	MBER	
NAME OF	DUR TOWN PROVINCE (Please tick your province)	
	KwaZulu-Natal province	
	Mpumalanga province	
	Other (specify)	
PLEASE TI	THE COURSE YOU WISH TO STUDY OR ARE STUDYING	
Mechanica	Ingineering Science (specify major(s))	
Electrical E	gineering Agriculture (specify major(s))	
Chemical I	gineering Other (specify)	
INSTITUTI	I(S) APPLICANT REGISTERED WITH OR APPLIED TO	
CENTRAL	PLICATIONS OFFICE (CAO) NUMBER (If applicable)	
YOUR HOME/PHYSICAL ADDRESS POSTAL ADDRESS		
CODE	CODE	

YOUR CONTACT PHONE NUMBERS	YOUR CONTACT CELLPHONE NUMBER			
YOUR CONTACT E-MAIL ADDRESS	ALTERNATIVE E-MAIL ADDRESS			
TELEPHONE NUMBER OF RELATIVE	CELLPHONE NUMBER OF RELATIVE			
TELEPHONE NUMBER OF A FRIEND	CELLPHONE NUMBER OF A FRIEND			
DO YOU HAVE ANY RELATIVE WORKING FOR THE SUGAR INDUSTRY (MILLING or FARMING) IF YES, PLEASE ATTACH PROOF (Salary slip or grower code) YES NO				
B. CHILD OF SUGARCANE FARM W IS YOUR MOTHER OR FATHER A SUGARCANE FA	• •	plicable)		
IF YES, PLEASE ATTACH PROOF (Salary slip or gr	ower code)		YES	NO
WHAT IS THEIR OCCUPATION AT THE FARM				
WHAT IS THE NAME OF THE FARM				
C. HIGH SCHOOL INFORMATION NAME OF SCHOOL				
TYPE OF CERTIFICATE OBTAINED (if completed grade 12)				
GRADE 12 LATEST RESULTS (final results or June	e results - attach			report)
SUBJECTS		RE: PERCENTAGE	SULTS SYMBOL	-
1 2 3 4 5 6				-
7 8				
D. TERTIARY STUDIES NAME OF INSTITUTION				
STUDENT NUMBER				
YEAR OF STUDY IN 2023 1ST YEAR 3RD YEAR			2ND YEAR 4TH YEAR	

CONTACT PERSON AT INSTITUTION		
HIS/HER CONTACT DETAILS		
his/her contact betales		
IF CURRENTLY REGISTERED, PLEASE SPECIFY C	OURSES	
(Also attach full academic record)		
1	6	
2	7	
3	8	
4 5	9	
5	10	
ARE YOU CURRENTLY A BENEFICIARY OF ANY	GRANT OR BURSARY?	YES NO
IF YES, PLEASE STATE THE NAME OF THE FUNI	DER	
OBLIGATIONS AND CONDITIONS OF THE EXIST	TING GRANT OR BURSAF	Y
E. FAMILY		
DETAILS OF PARENTS (If deceased, please atta	ich copy of death certifica	ate)
NAME & SURNAME OF YOUR MOTHER		
IDENTITY NUMBER OF YOUR MOTHER		
TELEPHONE NUMBER		
NAME OF EMPLOYER		
ANNUAL SALARY (attach proof of income)		
OCCUPATION		
NAME & SURNAME OF YOUR FATHER		
TELEPHONE NUMBER		
NAME OF EMPLOYER		
ANNUAL SALARY (attach proof of income)		
OCCUPATION		
DETAILS OF LEGAL GUARDIAN		
(To be completed by applicants living or suppo	rted by a guardian)	
NAME & SURNAME OF YOUR GUARDIAN		
TELEPHONE NUMBER		
NAME OF EMPLOYER		
ANNUAL SALARY (attach proof of income)		
OCCUPATION		
JOINT INCOME OF PARENTS OR GUARDIAN (A	pplication based on "nee	ed" will not be considered unless
proof of income is attached)		
up to R350 000 per annum		up to R500 000 per annum
up to R400 000 per annum		up to R550 000 per annum
up to R450 000 per annum		up to R600 000 per annum

						
OTHER FAMILY MEMBERS				1		
DO YOU HAVE SISTERS AND B	ROTHERS?	YES	NO			
HOW MANY DO YOU HAVE?						
HOW MANY ARE STILL IN SCH	DOL?					
F. ADDITIONAL INFORMATION						
Give details of any activity/pro	oject (academic o	r community wo	rk) in which yoւ	ı have done well		
at school and/or in the comm	unity					
		mentil liftung mig	ana siya dataila	ofwhere		
Have you ever visited a sugar of when and what your experien		ir mill. II yes, pie	ase give details	of where,		
when and what your experien	ce was like.					
Have you had a part time job		YES	NO			
If yes, please describe your du	ties and state the	name of the co	npany			
Have you been involved with a	any of the SITFE p	roject partners (Please tick)			
Midlands Community College			KZN science Ce	ntre		
Rally to Read			MiET Resource	Centre		
PROTEC			Izingolweni Scie	anco Contro		
TROTEC		1	12mgolwem Ser	chee centre		
How did you hear about the b	ursarv?					
now and you near about the b	ursary:					
G. YOUR APPLICATION		CONCIDEDED				
		CONSIDEREL	UNLESS I H		JIN	
DETAILED BELOW	IS ATTACHED					
1 Final Grade 12 Trial and		of results OR fin	al Tertiary exam	results if already		
-	registered at an institution.					
2 Documentation providing proof of sugar industry connection, if connected.						
3 Proof of family income (pay slip, pension receipts, affidavit detailing income or unemployment).						
4 Death certificate if a parent is deceased.						
5 Certified copy of your identity document.						
6 Confirmation of application / registration at an University, University of Technology or College of Agriculture.						
I hereby declara that the inform	nation contained	in this application	n form is true or	d correct. In the a	ent of	
I hereby declare that the information contained in this application form is true and correct. In the event of assistance being granted, I am prepared to enter into the required agreement with SITFE in terms of the						
rules of SITFE bursary scheme.						
Date Applicant's signature Guardian's signat			Guardian's signatu	ire		
				(If applicant under		
					1-1	

BURSARY APPLICATION CHECKLIST Sugar Industry Trust Fund for Education PO Box 700, Mount Edgecombe, 4300 Tel: 031 508 7034 Fax: 031 508 7191 www.sitfe.co.za bursaries@sasa.org.za



Please ensure you have completed the application form and attached the following documents:

√ Tick

Bursary application form is complete
Full Tertiary academic record to date or Grade 12 Trial results and Matric certificate
Documentation providing proof of sugar industry connection, if connected
Proof of family income (pay slip, pension receipts, affidavit detailing income or unemployment)
Death certificate if a parent is deceased
Certified copy of your South African identity document
Confirmation of acceptance at a College of Agriculture or University

Applicant's signature

This bursary is brought to you by <u>SA Bursaries</u>, South Africa's biggest bursary website.

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Please remove this page when submitting your application as it does NOT form part of the application pack.

www.zabursaries.co.za