



sport, arts & culture

Department:
Sport, Arts and Culture
REPUBLIC OF SOUTH AFRICA

NELSON MANDELA
UNIVERSITY

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DEPARTMENT OF SPORT ARTS AND CULTURE SCHOLARSHIPS PROGRAMME - 2024

APPLICATION FOR A SCHOLARSHIP

N.B. IT IS ESSENTIAL THAT ALL INFORMATION REQUESTED ON THIS FORM BE SUPPLIED

Please supply and attach copies of the following documents:

- Copy of full academic record
- Certified copy of I.D.

It is most important to supply this documentation, as failure to do so may compromise your application.

PLEASE RETURN THE COMPLETED FORM AND ATTACHMENTS TO:

The Nelson Mandela University DSAC Administrator, Main Building, 3rd floor, 0301A, South Campus for the attention of Mr Nkululeko Mkosana

CLOSING DATE: 11 March 2024 @ 18h00 no late applications to be considered.

Applicant details

Name of applicant

.....

Surname

.....

Other names

.....

Gender

Male

Female

Student number

.....

Home Language

.....

Address during
university semester

.....

.....

Address during
university vacation

.....

Province

.....

Email address:
(student & private)

.....

Contact telephone
number

.....

Date and place of
birth

.....

Identity number

.....

Marital status

Do you have a disability/special Needs? Yes No

Please specify the nature of the disability /special need

Employment details:

Are you employed? Yes No

Type of occupation
Work Place
Work place Telephone

(*To be used for statistical purposes only)

Highest previous qualification

.....
.....
.....

Confirmed Scholarships or Bursaries (state the name and amount of the bursary):

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.....
.....
.....

Study details:

Proposed course of study
Department/school

I, _____, hereby declare that the information stated in this application is true and correct to the best of my knowledge and belief. I have submitted this information knowing that, if I wilfully stated in it anything which I know to be false or which I do not believe to be true, I may be declared ineligible for this bursary and/or any sums already paid or granted to me may be withdrawn and will have to repay it. I also accept and give permission to the DSAC bursary Administrators at the Nelson Mandela University to retrieve and view all transcripts/academic records and student statement of accounts for the purposes of verification of applicant information and determining the eligibility of the applicant into the bursary scheme. I further undertake to inform the DSAC bursary Administrators at the Nelson Mandela University You will allow the DSAC bursary Administrators at the Nelson Mandela University and to verify your information with third parties. box if you agree).

HAVE YOU REMEMBERED TO ATTACH?

Certified I.D. document? Yes No

Full academic record? Yes No

TO BE FILLED IN BY THE HEAD OF DEPARTMENT / DIRECTOR OF SCHOOL (kindly note: It is the applicant's responsibility to get this section completed by the HoD/DOS):

Comments:

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.....

I support the above application: Yes No (please tick)

Name (please print):

Date: _____

Signature of HOD/DOS: _____