



STANLIB 17 Melrose Boulevard, Melrose Arch, 2196 P O Box 202, Melrose Arch, 2076
 Email to: bursary@stanlib.com

Student Bursary Application Form

PERSONAL DETAILS

TITLE	<input type="text"/>	INITIALS	<input type="text"/>
FIRST NAME/S	<input type="text"/>		
SURNAME	<input type="text"/>		
PREFERRED NAME/S	<input type="text"/>		
SPECIFY ANY DISABILITY	<input type="text"/>		
RACE (FOR EQUITY PURPOSES)	<input type="text"/>	GENDER	<input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
ID NUMBER	<input type="text"/>	DATE OF BIRTH	<input type="text"/> - <input type="text"/> - <input type="text"/>
			D D M M Y Y Y Y
RESIDENTIAL ADDRESS	<input type="text"/>		
	<input type="text"/>	POSTAL CODE	<input type="text"/>
POSTAL ADDRESS	<input type="text"/>		
	<input type="text"/>	POSTAL CODE	<input type="text"/>
CELLPHONE NUMBER	<input type="text"/> - <input type="text"/>	TELEPHONE (HOME)	<input type="text"/> - <input type="text"/>
E-MAIL ADDRESS	<input type="text"/>		

FAMILY INFORMATION

NUMBER OF SIBLINGS

PARENT INFORMATION

FATHER'S FIRST NAME/S	<input type="text"/>		
FATHER'S SURNAME	<input type="text"/>		
FATHER'S OCCUPATION	<input type="text"/>		
CELLPHONE NUMBER	<input type="text"/> - <input type="text"/>	TELEPHONE (HOME)	<input type="text"/> - <input type="text"/>

MOTHER'S FIRST NAME/S	<input type="text"/>		
MOTHER'S SURNAME	<input type="text"/>		
MOTHER'S OCCUPATION	<input type="text"/>		
CELLPHONE NUMBER	<input type="text"/> - <input type="text"/>	TELEPHONE (HOME)	<input type="text"/> - <input type="text"/>

RESIDENTIAL ADDRESS	<input type="text"/>		
	<input type="text"/>	POSTAL CODE	<input type="text"/>



GUARDIAN INFORMATION

GUARDIAN'S FIRST NAME/S

GUARDIAN'S SURNAME

GUARDIAN'S OCCUPATION

CELLPHONE NUMBER - TELEPHONE (HOME) -

RESIDENTIAL ADDRESS

POSTAL CODE

SECONDARY EDUCATION DETAILS

Please provide us with details of the last school(s) that you attended, including a list of the most recent subjects studied, as well as the grades and symbols that you achieved. Applicant must have obtained at least 70% average on all subjects and Mathematics (not Mathematical Literacy) must be inclusive of the subjects done. **Please attach a certified copy of your latest results.**

NAME OF SCHOOL

YEAR MATRICULATED

Subjects	Grade	Symbol
	%	
	%	
	%	
	%	
	%	
	%	
	%	

TERTIARY EDUCATION DETAILS

YEAR OF STUDY

UNIVERSITY/COLLEGE NAME

QUALIFICATION (BA, BCOM ETC)

CURRENT LEVEL OF STUDY

Subjects	Symbol



OTHER INFORMATION

What is your biggest achievement?

What differentiates you from your peers?

Why should STANLIB offer you this opportunity and describe your career goals?

DECLARATION

I hereby declare that the above information is true and correct and acknowledge that misrepresentations made by me will prejudice my application with STANLIB. I also understand, that should my application be successful, standard recruitment checks are required by STANLIB.

SIGNATURE OF APPLICANT DATE - -
D D M M Y Y Y Y
SIGNED AT

FOR OFFICE USE

DATE PROCESSED - -
D D M M Y Y Y Y
PROCESSED BY
APPLICATION SUCCESSFUL? YES NO

