



Graduate School

BURSARY APPLICATION FORM 20

STUDENT NUMBER

Input boxes for student number

CLOSING DATE: 30 NOVEMBER

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THIS FORM (IN BLOCK LETTERS USING A BLACK PEN).

- 1. The bursary is awarded on the basis of financial need and academic achievement.
2. Bursaries are not awarded for Postgraduate studies.
3. The bursary will not cover any textbooks, accommodation or pocket money.
4. Prospective bursary students may be called in for an interview before final selection.
5. The bursary will cover IMM Graduate School assessment fees.
6. Send the completed application form, including supporting documents to: Bursary Applications, National Registrar, PO Box 35263, Northway, 4065.
7. The outcome of the bursary application will be released annually on 31 January.

PLEASE ATTACH A PHOTOGRAPH

SECTION A: PERSONAL DETAILS (ALL STUDENTS)

TITLE [] Prof [] Dr [] Mr [] Mrs [] Ms [] Miss Other _____ GENDER [] Male [] Female

SURNAME As per ID Document _____ PREFERRED NAME _____

FIRST NAME(S) As per ID Document _____

ID NO [][][][][][][][][][][][][][][][] DATE OF BIRTH [D][D][M][M][Y][Y][Y][Y]

MARITAL STATUS _____ MAIDEN NAME _____

NUMBER AND AGE OF CHILDREN _____

RESIDENTIAL ADDRESS _____

CODE _____

POSTAL ADDRESS _____

CODE _____

TELEPHONE NO. WORK: (_____) _____ HOME: (_____) _____

FAX: (_____) _____ CELL PHONE: _____

EMAIL _____ PREFERRED METHOD OF URGENT NOTIFICATIONS: SMS [] CELL []

WORK DETAILS

OCCUPATION _____ NAME OF EMPLOYER _____

TELEPHONE NO. WORK: (_____) _____ EMPLOYMENT TYPE: PART TIME [] FULL TIME []

SECTION B: DETAILS OF PARENT / GUARDIAN (Students living with their parents/guardians)

FULL NAME AND SURNAME OF FATHER/GUARDIAN _____

OCCUPATION OF FATHER/GUARDIAN _____

FATHER/GUARDIAN TELEPHONE NO. WORK: (_____) _____

FATHER/GUARDIAN EMPLOYER _____

FULL NAME AND SURNAME OF MOTHER/GUARDIAN _____

OCCUPATION OF MOTHER/GUARDIAN _____

MOTHER/GUARDIAN TELEPHONE NO. WORK: (_____) _____

MOTHER/GUARDIAN EMPLOYER _____

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SECTION C: PROGRAMME DETAIL

Which IMM Graduate School programme are you enrolled for / intend enrolling for? _____

SECTION D: ACADEMIC QUALIFICATIONS

Name of School/College: _____ Year completed: _____

List the subjects/modules in which you were examined and the marks, grades or symbols you received: _____

Were you awarded any academic prizes or distinctions at high school? Please give details:

Did you hold any kind of office at high school (scholastic, sporting or other):

List all universities, colleges or other institutions where you have registered as a student (whether you completed the course or not)

	Year started	Name of degree/diploma/certificate	Full/Part time
1			
2			
3			
4			

Please supply a certified copy of all academic records from all external institutions (not IMM Graduate School)

SECTION E: GENERAL

Do you hold any other bursary or scholarships? Yes No If YES, state sponsor: _____

Did you qualify for an IMM Graduate School Bursary in the previous academic year? Yes No

SECTION F: ESSAY

Please submit and attach a one-page essay about yourself and how this bursary could assist you in your chosen studies.

SECTION G: STUDENT DECLARATION

I certify that the information that I have provided on this application is accurate and complete and that certified copies of documentation requested is attached.
I understand and accept that the outcomes of the bursary application will be released by 31 January via e-mail.

STUDENT SIGNATURE _____ DATE _____ / _____ / 20

FOR OFFICE USE ONLY

Consultant name: <input style="width: 90%; height: 20px;" type="text"/>	Date application was received <input style="width: 90%; height: 20px;" type="text"/>	Documentation complete Yes <input type="checkbox"/> No <input type="checkbox"/>	Members of Evaluation panel <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 33%; height: 20px;"> </td><td style="width: 33%; height: 20px;"> </td><td style="width: 33%; height: 20px;"> </td></tr> </table>			
Application approved Yes <input type="checkbox"/> No <input type="checkbox"/>	Authorised by <input style="width: 90%; height: 20px;" type="text"/>	Date <input style="width: 90%; height: 20px;" type="text"/>				

National Office: Atlas Studio, 33 Frost Avenue, Braamfontein Werf, 2193, P O Box 91820, Auckland Park, 2006, Tel +27 (0)11 628 2000, Fax +27 (0)11 726 4505, Email info@immgsm.ac.za
Cape Town Student Support Centre: Level 3, Stadium on Main, Main Road, Claremont, Cape Town, 7708, P O Box 23998, Claremont, 7735, Tel +27 (0)21 671 4426, Email info.ct@immgsm.ac.za
Durban Student Support Centre: 245 Peter Mokaba Road, Corner Valley View Road, Morningside, Durban, P O Box 35263, Northway, 4065, Tel +27 (0)31 312 2239, Email info.dbn@immgsm.ac.za
Greenstone Student Support Centre: Stoneridge Office Park, Building B, 8 Greenstone Place, Greenstone Hill, Edenvale, 1610, P O Box 2780, Edenvale, 1610, Tel +27 (0)11 609 5003, Email info.greenstone@immgsm.ac.za
Milpark Student Support Centre: 33 Frost Avenue, Braamfontein Werf, 2193, P O Box 91820, Auckland Park, 2006, Tel +27 (0)11 628 8029, Email info.milpark@immgsm.ac.za
Pretoria Student Support Centre: 150 Anderson Street, Corner Jan Shoba Street, Brooklyn, Pretoria, 0181, Postnet Private Bag x 1, Menlo Park, 0102, Tel +27 (0)81 756 6016, Email info.pta@immgsm.ac.za
Sandton Student Support Centre: Grayston Ridge Office Park, 144 Katherine Street, Sandton, 2196, P O Box 414004, Craighall, 2024, Tel +27 (0)11 783 6662, Email info.sandton@immgsm.ac.za
Stellenbosch Student Support Centre: Corner of Drukkers Road and Papegaaiand Road, Stellenbosch, 7600, Postnet Suite 15, Private Bag X5071, Stellenbosch, 7600, Tel +27 (0)21 883 9104, Email info.stellenbosch@immgsm.ac.za
Zimbabwe Administrative Office: 21 Lezard Avenue, Milton Park, Harare, P O Box MP 394, Mount Pleasant, Harare, Tel +263 (0)86 7700 4806 or +263 (0)773 475 003, Email imm.zim@immgsm.ac.za