



**VHEMBE DISTRICT MUNICIPALITY
EXECUTIVE MAYOR'S BURSARY
FUND
2024 APPLICATION FORM**

EXECUTIVE MAYOR'S BURSARY FUND

SECTION A: PERSONAL DATA

1. Name of Applicant

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2. Physical address:

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.....
.....

3. Postal address

.....
.....

Code

4. Name of local municipality

.....

5. Ward Number

.....

6. Cell Number

.....

7. Fax Number

.....

8. Nationality

.....

9. Gender

.....

10. Date of birth

.....

11. Identity number

.....

12. Disabilities (specify if any)

.....

SECTION B: DETAILS OF FAMILY BACKGROUND

13. Details of parents

Name of Mother

.....

Name of Father

.....

Name of Mother's employer

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Name of Father's employer

.....

Mother's Contact no.

.....

Father's Contact no.

.....

14. Details of Guardian

Name of guardian

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Name of guardian's employer

.....

Guardian's contact no.

.....

15. Briefly describe your financial status

.....

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SECTION C: ACADEMIC HISTORY

16. Name of secondary school / Tertiary Institution

.....

17. Address of school / Institution

.....

.....

..... Code

18. Telephone number of school / Institution

.....

19. Name of school principal / Rector

.....

20. List subjects passed with relevant marks / symbols

SUBJECTS	GRADE	SYMBOL

SECTION D: QUALIFICATION TO BE STUDIED

21. Type of Qualification (DIPLOMA & BACHELOR (Bsc) (B. Administration, Hydrology and Water Management, Environmental/Disaster/ Waste Management, Regional and Town Planning, Engineering/Civil/Electrical/Mining/Mechanical/ Chemical, Finance/Financial Accounting/B Com Accounting/ Auditing, Economics and Business Management / Tourism/ Agriculture/Information Technology,Media Studies, Developmental Studies, Youth Development.

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22. Name of Institution

.....
.....

23. Name and number of subjects / modules

.....
.....

24. Duration of the course

.....

25. Cost of the course

.....

26. Starting date

.....

27. Explain how this course will help you accomplish your goals for the future

.....
.....

NB: The decision of the selection committee is final and no correspondence will be entered into. Successful candidates will be required to sign a contract. Correspondence will only be entered into with successful students.

SECTION E: DECLARATION

1. Name of Applicant

.....

Signature

Date

I declare that the information supplied in this application is to the best of my knowledge true and correct. I understand that any false information will automatically disqualify me from being part of the learnership project.

NAME OF APPLICANT

SIGNATURE

DATE

10 Annexure B: Declaration

OATH OF SECRECY

13. I _____ with ID

14. NO. _____ hereby swears that:

15. I will not either directly or indirectly divulge or disclose to anyone or be a party to the divulging or disclosing of information which has been in any way acquired by me in connection with the discharge of duties imposed upon or entrusted to me by virtue of the office that I am holding except when I shall be required to do so in the course of my duty or by order of a competent Court of Justice and I will in all matters observe secrecy with regard to everything.

16. If I am found to have divulged or disclosed any information, the Vhembe District Municipality will accordingly apply its disciplinary policies to deal with the transgression.

17. I know and understand the contents of this declaration. I have no objection to taking the prescribed Oath. I consider the prescribed Oath to be binding on my conscience.

18. Signature of declarant: _____

19. Thus done and sworn before me at Thohoyandou on this _____ day of
_____ 2023/24

20. To be completed by the Chairperson

21. FULL NAME(S) AND SURNAME _____

22. SIGNATURE _____

23. DATE _____

24. Thus done and sworn before me at Thohoyandou on this _____ day of
_____ 2023/24