

Bursary Application Form

PROFILE						
Name:	Last Name:	First Name:	Middle Name(s):	Title: Mr. Mrs. Ms. Miss Other(state)		
Date of Birth:		Gender: Male [] Female []		Type of Scholarship CPEA []		
Country of Birth:		Nationality:		Disability: Yes [] No [] If Yes, please state:		
		CONTACT	NFORMATION			
Permanent Address:		Home Phone:	Cellular Phone:	Email address:		
Yes [] No []	·	ded a scholarship/b	·			
			NFORMATION			
Mother/Stepmother/Guardian (omit as necessary)			Father/Stepfather/Guardian (omit as necessary)			
Name:			Name:			
Address:			Address:			
Telephone Work: Home: Cellular: Occupation:			Telephone Work: Home: Cellular: Occupation:			
Employer:			Employer:			
Weekly [] Fortnightly [] Monthly []			Weekly [] Fortnightly [] Monthly []			



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	EXTRA- CURRICULAR RECOR	D				
Please indicate the extra-curricular activities in which you are involved:						
Sports [] Clubs/ Societies [] Community Base Activity []						
Sports	Clubs/Societies	Community Activity				
Activity Name:	Name:	Name:				
,						
	Position Held:	Position Held:				
	Membership Date:	Membership Date:				
	ESSAY					
	p will be to you. Your answer,	although not limited to, it should refer				
to your financial situation.						



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FOR OFFICIAL USE ONLY <u>Documents Submitted</u>						
Copy of CPEA Results Letter attesting to child need of financial aid	[]					
ASSESTMENT COMMITTEE'S DECISION						