

BURSARY APPLICATION FORM



RLM MAYORAL BURSARY SCHEME

2026

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STUDI DISCIP	LINE	APPL	TING	FUR.

COURSE.....

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Part 1 - Application Details					
Student Number (if available)					
At which University/Institution are you/do you intend studying? (Attach proof of registration or admission letter)					
Discipline/Qualification, e.g. BComm (Accounting):					
Main Subjects:					
Mark the academic year for which you are appying:					
Have you been granted a RLM Bursary Scheme before? ₹ Yes No					
If Yes to the above sta	te for which degree	diploma/certificate and the	e year(s) in concern:		
Part 2 - Applica	nt Informatio	n			
Surname:		Ini	tials:		
Full Names:					
Date of Birth:		ID Nu	mber		
Title:	Gender: Male	Female			
Race: African	Colou	ured Indian	Wh	ite	
Nationality:		Marital Status:			
Home Language:		Disability: Yes	No 🗌		
If Yes(Explain):					
Contact Details: Home Tel: Alt No:					
Email Address:			Name of Contact:		
Residential Address:					
City:		Province:		Code:	
City: Postal Address:		Province:		Code:	
		Province:		Code:	
		Province:		Code:	
Postal Address:	your parent(s), a		mber(s) have been	Code:	yed by
Postal Address:	your parent(s), a al Municipality Relationship	Province:	mber(s) have been Occupation	Code: or are emplo	yed by
Postal Address: City: Please indicate if Rustenburg Local		Province:		Code: or are emplo	

	anable results belov	w (Grade 12 -June/ Grade			
Grade:		Year of Results:			
Subject	HG/SG	Symbol	Subject	HG/SG	Symbol
		+			
		1		-	
Aggregate Symbol:					
, , , , , , , , ,					
		Tertiary Qualif	ications		
Qualification	Institution	Major Subject(s)	Duration	Year	
o you currently have	e a scholarship, Bur	sary, or Loan? Yes	No		
f Yes, what is the nar	me of the Award:				
Who has it been awa	Anna en mue incommune 💆				
	rded by:				
What is the value of t	rded by:				
	rded by:	formation			
What is the value of t	rded by:		nitials:		
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Who has it been awar What is the value of the Part 4 - Parent Surname: First Names: Cell No: Residential Address Postal Address: Type of Employment Employer Address: Phone:	rded by: he award: s/Guardian Interest Tell: Permanent	No:	Email:	Self E	mployed
What is the value of the Part 4 - Parent Surname: First Names: Cell No: Residential Address Postal Address: Type of Employment Employer Address:	rded by: he award: s/Guardian Interest Tell: Permanent	/Guardian Employn	nent Details Contract	Self E	mployed

Pre	vious	emp	love	er(s)

Name of	Occupation	Period of Employment

Household Information

otal Number of people living will lumber of Dependants:	Dependants in School:	Not in School:
otal Number of household men	mbers earning own income:	
Other source of household incom	me:	
Deferences		
References		
Name:	Address:	Phone:
	Address:	Phone:

- 3. I understand that all information provided in my application may be followed-up and I authorize Rustenburg Local Municipality to contact any relevant person or intitution for relevant references.
- 4. I authorize any school/ university/ employer to provide Rustenburg Local Municipality with relevant information that may be useful in making a
- 5. I hereby indemnify Rustenburg Local Municipality or any of its companies or staff against any claim for illness or accidental injury sustained by me during a visit to their operations, should I be invited to their premises

Signature of applicant:	Date:
Signature of parent/guardian:	Date:

The closing date for submission: 30 October 2025 at 16h00

Please attach the following documents

- · Grade 12 results or recent academic record
 - · Certified copy of identity document
- · Certified copy of parent/guardian id document
- · Letter of admission or proof of admission from the institution of higher learning
- Proof of parents/guardian income (of total monthly income not exceeding R3 500)
 - Copy of pension slip (for indigent applicants)
 - · Affidavit (if parent is unemployed)
 - Proof of residence

Closing Date: 31 October 2025

NB: Please ensure that the Proforma Invoices requested are from the Institution that have a valid Tax Clearance Certificate