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Council for Geoscience
Applied Geoscience Solutions

BURSARY APPLICATION FORM 2017-2018

FULLTIME BURSARY APPLICATION FORM

APPLICANT'S INFORMATION

Surname & Name:		Gender: Female / Male	Race :
Date of birth:	Mobile:	Phone:	E-mail:
Current address:			
City:	Province:	Postal Code:	
Home address :			
Country of Birth:	ID Number:		
Driver's license: YES / NO	4 x 4 Driving: YES / NO	Attach ID Copy	

HIGH SCHOOL EDUCATION

Name of High School:		
School Address:		
Phone:	E-mail:	Fax:
City:	Province:	Postal Code:
Mathematics: Comp Level	Physical Science: Comp Level	Attach Grade 12 Certificate

UNIVERSITY EDUCATION

Name of University:	Student number:
Name of First Degree:	Year of initial registration:
Current (Year of) study:	Majors:

Name of Residence (UNIVERSITY OR PRIVATE)

Post Grad Degree:		Geology field	
RESEARCH TOPIC:			
Attach university transcript NOT certificates			
NEXT OF KIN			
Name of a relative not residing with you:			
Relationship:	Mobile:	Phone:	E-mail:
Address:			
REFERENCES			
Name:	Email:	Phone:	
Name:	Email:	Phone:	
SIGNATURES			
Signature of applicant:		Date:	
Signature of witness:		Date:	

This form should not be changed or altered; any altered form will lead to automatic disqualification

Have you attached the following?

Documents	Please mark
ID copy	
Grade 12 certificate	
Academic transcript	