280 Pretoria Street, Silverton, Pretoria Private Bag X112, Pretoria 0001, South Africa

Tel: +27 (0)12 841 1911 Fax: +27 (0)12 841 1221 email: info@geoscience.org.za website: www.geoscience.org.za



COUNCIL FOR GEOSCIENCE FULL-TIME BURSARY APPLICATION FORM

No.	Available Field of Study for the 2024 intake	Mark with (X) the field you are applying for (only select one)	Indicate the level applying for (BSc, BSc Hon, MSC, PhD)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			

FULLTIME BURSARY APPLICATION FORM 2024

Processing of Personal Information will be done in accordance with CGS Protection of Personal Information (Privacy) and Retention of Documents Policy, and POPIA

Surname & Nam	e:	(1777ao	y) and Heterlion or i		nder:	10 1 01 11	Race:	
Occupant of Birth				15.	V			
Country of Birth:			ID Number:					
Date of birth:		Mobile:		E-mail:				
Home Address:				Res	sidential Add	ress:		
City/Town:	Prov	ince:	Postal Code:	Cit	y/Town:	Provin	ce:	Postal Code:
			HIGH SCHOO	DL ED	UCATION			
Name of High S	chool:							
School Address								
Tel:				Em	ail:			
City/Town:			Province:			Postal	Code:	
Mathematics - A	Achiev	ed Leve	l:	Phy	ysical Science	e - Achi	eved Le	vel:
		INSTI	TUTION OF HIGH	ER LE	ARNING EDU	CATION		
			s who are in grade		r have comple	eted mat	ric)	
Have you applied at a University (mark with X				Yes		No		
			ersity(mark with	x):	Yes		No	
Name of the Ur	iversi	ty:			Student nun	nber:		
Initial year of re	egistra	tion of t	he qualification	& fie	eld of study a	applying	g for:	
Mention other been confirmed		ries you'	ve applied for a	nd/o	r any bursar	y grants	which I	nave already

		ironea at	t a university i.e. 1 st , 2 nd ,3	5 ~ 4" ana/(or Jinai year)		
Name of the University:			Student number:				
Initial year of registra	tion of the qualifi	cation 8	k field of study applyir	ng for:			
RESEARCH TOPIC (BSo	Hons, MSc & Phi	D)					
Mention other bursar been confirmed:	ies you've applie	d for an	d/or any bursary gran	ts which h	ave already		
1. Alternative Contact Person			2. Alternative Contact Person				
Name:			Name:				
Surname:			Surname:				
Mobile:			Mobile:	1			
Email:			Email:				
Home Address:	ollowing document	s (mark	Home Address: with X)?				
Documents	Please mark	<u> </u>	cuments		Please mark		
ID copy		Grade	Troube man				
in copy	Grade 12 certificate		An updated CV				
		10.0	Proof of Acceptance by the University				
Grade 12 certificate		Proof	of Acceptance by the Onive	ISILY			
Grade 12 certificate			onal Admission by the Univ		<u> </u>		
Grade 12 certificate Academic transcript Motivation Letter	_	Provisi or altere		ersity	form will		
Grade 12 certificate Academic transcript Motivation Letter	_	Provisi or altere	onal Admission by the Univ	ersity	form will		
Grade 12 certificate Academic transcript Motivation Letter NB: This form show CLOSING DATE:	automo	Provisi or altere atically b	onal Admission by the Universe. Incomplete and late of e disqualified. ation is to the best of my ki	versity application			

NB: If you have not been contacted within one (1) month after the closing date, please accept that your application was unsuccessful.

Date