



MORETELE LOCAL MUNICIPALITY



MORETELE MAYOR'S STUDY GRANT APPLICATION FORM (2021 Academic Year)

INSTRUCTIONS REGARDING THIS STUDY GRANTFORM

-  Use block letters to complete the application form
-  Give concise answers and where applicable mark with X

Please attach certified copies of the following:-

- Identity document
- Grade 12 certificate or latest results for current grade 12 learner
- Acceptance letter & statement of fees from recognized tertiary institution
- Motivation letter (Section 4 of the application form)
- Proof of parents or guardian income
- Proof of residence from ward councilor / tribal authority

Where did you hear about Moretele Mayor's Study Registration Fee Grant?

News Paper	Online	Facebook	Whatsapp	Other (Please specify)
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Closing Date: 15th January 2021

**Completed application forms must be hand delivered to:
Moretele Local Municipality Offices: - 4065B Mogodi Section, Mathibestad.**

Office of the Mayor – Special Projects Unit

Enquiries: Pule K Moseki – Manager Special Projects Unit

Contact Details: 012 716 1300/1305 or 082 823 5521

Email: pule.moseki@moretele.gov.za



1. PARTICULARS OF APPLICANT									
SURNAME:					FULL NAMES:				
IDENTITY NUMBER:						DATE OF BIRTH:			
GENDER:		MALE			FEMALE				
RACE:		AFRICAN		COLOURED		INDIAN		WHITE	
DISABILITY		YES:	NO:	If yes please specify the nature of disability (Below)					
CONTACT NUMBER:					ALTERNATIVE NUMBER:				
EMAIL ADDRESS:									
PHYSICAL ADDRESS:					POSTAL ADDRESS:				
2. PARTICULARS OF APPLICANT									
NB: Please attach certified copies of the latest school results, Grade 12 certificate, and or tertiary results and academic records									
What are you doing this year: (Please mark with X)				Grade 12		Tertiary Student		Gap Year	
Highest Educational Qualification Obtained:									
Name of the school you are currently attending or where you completed grade 12:									
Name of tertiary you are currently registered at:									

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PROPOSED PROGRAMME FOR 2020 ACADEMIC YEAR

FIRST CHOICE:	
INSTITUTION:	CAMPUS:
STUDENT NUMBER:	
SECOND CHOICE:	
INSTITUTION:	CAMPUS:
STUDENT NUMBER:	
Please attach a certified copy of acceptance letter and or statement of fees	

3. DETAILS OF PARENTS / LEGAL GUARDIAN AND FAMILY (LIVING WITH YOU)

Attach a proof of income: Pay slip, Social grant receipts etc.

SURNAME:		FIRST NAMES:			
RELATIONSHIP:	FATHER	MOTHER	LEGAL GUARDIAN	OTHER, SPECIFY	
MARITAL STATUS:	MARRIED	DIVORCED	SEPARATED	UNMARRIED	WIDOWED
EMPLOYED:	YES	NO	PENSIONER		
Other members of the family who are not living at your home not mentioned above					
NAME	Relationship (Brother; Grandparent)	Category (Child; Student; Adult)	Income(Per month)	TYPE OF INCOME (Wage; Grant pension)	

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4. MOTIVATION “WHY YOU MUST BE CONSIDERED FOR MORETELE MAYOR’S STUDY REGISTRATION FEE GRANT (Use additional page if necessary)

DECLARATION

I _____ hereby declare that all the information provided (including any attachments) is complete and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being disqualified.

Applicant Signature: _____

Date: ___/___/20___

Parent/Guardian Signature: _____

Date: ___/___/ 20___

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