

GA-SEGONYANA ASSMANG BURSARY SCHEME Application Forms

Year :2026



Guidelines for user

- Use capital letter
- Give concise answers
- Not for use by Assmang/ Municipal employees
- All attached copies must be certified
- Incomplete or late applications will not be considered

1. Please indicate how you learned about this bursary scheme?

Please tick	Newspaper		Radio		Friend		Parents		Other (please specify)	
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2. Applicants bio data

Surname									
First name(s)									
Gender	tick		Male			Female			
Marital status									
Residential address									
Postal address									
Municipal Ward									
Your email address									
Alternative email address									
Your contact number									
Who can we contact in case of emergency									
Name									
Relationship to applicant									
Contact number									
Physical address (If not using									

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10. What first choice field of study did you apply for? _____

11. What is your second choice field of study? _____

12. If already studying complete the table below as well (attach evidence)

Field	Details
13. Year started	
14. Years completed	
15. Faculty name	
16. Institution's name	
17. Reason for applying for this financial assistance	
18. Courses already completed	
19. Who paid for your studies before applying to this scheme (parents, piece jobs, bursary)	
20. Conditions of the agreement	
21. Reasons for changing source of financial support	

22. State your financial position (To be completed if questions 13-21 has not been responded to)

23. Are you, at present, studying through a bursary?	Yes		No	
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- Proof required

24. Which bursary scheme are you currently on?			
25. What do they cover?			
26. Father's occupation			
27. Employer's name			
28. Income (Please tick where applicable)	Less than R2 500 a month	Between R2 500. 00 and R6 000. 00	Above R6 000. 00

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29. Mother's occupation			
30. Employer's name			
31. Income (Please tick where applicable)	Less than R2 500 a month	Between R2 500. 00 and R6 000. 00	Above R6 000. 00
32. How many dependants are at home?			
33. No of siblings at tertiary			
34. No. of siblings at school			

- Details of parents/ guardian

Title			
Name/s			
Id number			
Relationship tick	Mother:	☐	
	Father:	☐	
<i>Other (specify)</i>			
Postal address			
Residential address			
Email address			
Tel No. (Home)			
Tel. No (Work)			
Cell No.			

35. Declaration

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I certify.....(Name& Surname),
Identity number.....hereby certify that the information provided is, to the
best of my knowledge, correct and will accept getting disqualified should cross checking prove otherwise.

Applicant's signature

Date

Please attached certified copies of the following documents:

- Copy of applicant identity card
- Academic record (second year)
- Grade 12 results
- Parent/Guardian proof of income
- Affidavit from SAPS if the parent are/is unemployed
- Provisional acceptance by a university
- Proof of residence