



Your ID Number																				
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Complete the ID number on each page

BURSARY AGREEMENT FORM:



2019	For use by NSFAS Head Office			
	Acc No.		Bursary No.	

Important Note:
• Any alterations to the form must be signed by the Student.
• Scan and attach to the email a certified copy of your South African Identity Document.
• South African citizen.



PARTICULARS OF STUDENT Please fill out as reflected on your ID document*:

* Surname:		Maiden surname (if applicable)	
* First Names			
* ID Number			
Title		* Date of birth	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female		

Demographic and personal details

Make sure that you complete each relevant section.

Do not make mistakes so take your time.

Do you have a disability?
 Multiple Emotional Intellectual Physical Communication Hearing Sight Other

If other, please specify: _____

Race (for statistical purposes only)
 African Asian Coloured Indian White

Marital Status
 Single Married Divorced Widowed

_____	NDDL
Student Initials	Institution Initials

Initial by Student Initials



Your ID Number																						
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Complete the ID number on each page

Physical Home Address (not a P.O. Box)

Street Address		Municipality	
City/Town		Province	
Country		Postal Code	

Complete your address

Postal Address (if different from home address):

City/Town		Province	
Postal code			
Home telephone		Cell phone	
Email Address (Institution)		Email Address (Personal)	

Complete details for next of kin, i.e. Mother, Father or Spouse

PARTICULARS OF NEXT OF KIN DETAILS			
Surname	Name	Title	
Relationship (parent, legal guardian, sibling, spouse, partner, other):			
Address (if different from above)			
City/Town		Province	
Country		Postal Code	
Home telephone		Work telephone	
Cell phone			

This is your 2019 programme details

PARTICULARS OF STUDY			
Institution	Campus	Student Number	

Initial by Student Initials

_____ Student Initials	NDOL _____ Institution Initials
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Your ID Number																						
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Complete the ID number on each page

This is your 2019 programme details

Course of Study (B Science, B Commerce etc. Please complete in full, no abbreviations)		
Specialisation		
Level of study (Academic level that the Student has progressed to, i.e. 1st Year, 2nd Year, etc.)		
NSFAS TOTAL DEBT		
Bursary Amount (subject to Bursary Conditions)	R	Aggregate Symbol

I have provided you with the Bursary Amount

Aggregate symbol is the mark that you achieved in your previous study year/programme

I declare that I have read and understood the content of this Schedule of Particulars and that the information supplied is true and correct.

Signed by the STUDENT at on this day of 20.....

AS WITNESSES'

1	STUDENT SIGNATURE
2	PARENT/GUARDIAN SIGNATURE*

[*Any Student under the age of majority (18) must obtain the assistance and signature of his/her parent or legal guardian.]

Place where you signed i.e. Stellenbosch

On this i.e. 3rd day of September 2020

FOR USE	Witness signature	Student Signature
ACCEPTED
AS WITNESSES		
1	
2	National Student Financial Aid Scheme	
	Duly authorised thereto	

_____ **NOOL** _____
 Student Initials Institution Initials