

AB INBEV SCHOLARSHIP APPLICATION FORM



IMPORTANT: PLEASE TAKE NOTE BEFORE YOU GET STARTED

This online application will take approximately 45 minutes to complete. The application closing date is **16 August 2019**. Please make sure that you have the following documentation available to upload together with this application:

A certified copy of your Identity document;

A copy of your 2 (two) latest academic transcripts or exam results;

A copy of your parents/legal guardians Identity documents;

A copy of official payslip of each of your parents/ legal guardians;

If your parents or the person who supports you or your legal guardian is retired, please provide a copy of an official pension slip or bank statement showing pension payment;

A copy of a SASSA letter if any of your family members are receiving a social grant and are also contributing to your household income.

DISCLAIMER:

The requirements for data subject consent and disclosures as contained in the Protection of Personal Information Act 4 of 2013 (POPI).

INTRODUCTION:

Make A Difference Leadership Foundation (MAD Leadership Foundation) is committed to protecting the applicant's privacy and recognises that it needs to comply with statutory requirements in collecting, processing and distributing of personal information. The Constitution of the Republic of South Africa provides that everyone has the right to privacy and the Protection of Personal Information Act 4 of 2013 ("POPI") includes the right to protection against unlawful collection, retention, dissemination and use of personal information. Thus the processing of personal information by MAD Leadership Foundation will be governed by POPI.



APPLICATION FORM FOR 2020 INTAKES

PROPOSED CONSENT FOR THE APPLICATION FORM:

By completing the application form you confirm and consent as necessary that MAD Leadership Foundation may process (collect, use, store or otherwise deal with) your information for the purposes of considering your application and awarding the scholarship.

GENERIC CONSENT:

I hereby confirm and consent as necessary that MAD Leadership Foundation may process (collect, use, store or otherwise deal with) my information (including processing outside of the borders of South Africa), which was voluntarily provided, for the purposes of considering my application and awarding the scholarship and requirements of the law. I hereby confirm that I have read and understood the contents of this document, specifically the portion relating to the processing of my personal information. I also confirm that the information provided by me to MAD Leadership Foundation is true, correct and current, and that I will inform MAD Leadership Foundation if any of the information provided changes.

DISCLOSURES:

How we use your information:

Your information will be confidential and will only be processed if you consented thereto; it is necessary to conclude or perform in terms of a contract with you; the law requires it or your, our or third parties lawful interest is being protected or pursued.

MAD Leadership Foundation may process your information. Information includes, amongst others, information regarding national origin, age, language, birth, education, financial information, id number, email address, physical address, telephone number, psychometric assessments and your name.

The processing of information includes the collection, storage, updating, use, making available or destruction thereof.

MAD Leadership Foundation may process your information for the following reasons (amongst others):

- To comply with legislative, regulatory, risk and compliance requirements (including directives, sanctions an d rules), voluntary and involuntary codes of conduct and industry agreements or to fulfil reporting requirements and information requests;
- o To develop, test and improve our offering for you;
- o For historical, statistical and research purposes;
- o to enable MAD Leadership Foundation to deliver goods or documents or notices to you;
- o For security, identity verification



APPLICATION FORM FOR 2020 INTAKES

MAD Leadership Foundation may share your information with the following persons (amongst others) who have an obligation to keep your information secure and confidential:

- o In order to process scholarship applications, it is necessary to provide scholarship partners or potential partner with personal information of the applicant, which personal information includes, but are not necessarily limited to the applicant's academic record and a copy of the scholar's ID. This information is distributed to scholarship partners, usually by electronic means in the form of an email. This personal information to scholarship partners is necessary for purposes of contractual obligations.
- o Law enforcement and fraud prevention agencies and other persons tasked with the prevention and prosecution of crime.

MAD Leadership Foundation may process your information using automated means.

You have the right to request us to correct or delete any information MAD Leadership Foundation has about you if it is inaccurate, irrelevant or excessive, out of date, incomplete, misleading, obtained unlawfully or no longer authorised to be kept.

You may object on reasonable grounds to the processing of your information. You may not object to the processing of your information if you have provided consent or legislation requires the processing. You must inform us of your objection.

You have the right to withdraw your consent which allows us to process your information, however, we will continue to process your information if permitted by law.

By completing the application form you confirm and consent as necessary that MAD Leadership Foundation may process (collect, use, store or otherwise deal with) your information for the purposes of considering your application and awarding the scholarship.

ACCEPT DISCLAIMER	Accept	Disagree
APPLICANT SIGN HERE		
DATE		



APPLICATION FORM FOR 2020 INTAKES

PLEASE NOTE:

- 1. No guarantee can be given that this application for a MAD Leadership Foundation Scholarship will be successful.
- 2. MAD Leadership Foundation reserves the right to withdraw or amend any listed available scholarships without prior notification.
- 3. Scholarships are offered subject to funding and availability.
- 4. Scholarships are awarded by MAD Leadership Foundation, and related parties where applicable, and their decision is final. No correspondence will be entered into regarding the reasons for their final decision.
- 5. MAD Leadership Foundation makes use of certain criteria to identify suitable partner schools. Any chosen school is subject to approval according to said criteria.
- 6. If the applicant is successful, participation in the scholarship programme will be subject to adherence to a signed scholarship agreement.
- 7. Information derived from Psychometric tests done by MAD Leadership Foundation will stay strictly confidential and the property of the Foundation.
- 8. If you have not received any feedback from us by the **23 August 2019**, unfortunately, your application has been unsuccesful.



SAB/ABINBEV APPLICATION FORM FOR 2020 INTAKES
ARE YOU A SOUTH AFRICAN CITIZEN? Yes No
SELECTION CRITERIA: LANGUAGE
CAN YOU (THE APPLICANT) SPEAK, READ, WRITE AND UNDERSTAND BASIC ENGLISH?
Yes No
SELECTION CRITERIA: AGE / GRADE
WHAT GRADE ARE YOU IN (2019)?
Grade 12 First year of tertiary studies None of the above
SELECTION CRITERIA: FIELD OF STUDY
IF YOU ARE IN GRADE 12, WHICH OF THE FOLLOWING DEGREE COURSES HAVE YOU APPLIED TO STUDY IN 2020?
Agricultural Science BSc Mathematics Chemical Engineering
Electrical Engineering BSc Physical Science BSc Computer Science
Mechanical Engineering BSc Statistics BSc Biological Science
BSc Actuarial Sciences None of the Above
PLEASE LIST THE INSTITUTIONS YOU HAVE APPLIED TO FOR COURSES INDICATED ABOVE:



APPLICATION FORM FOR 2020 INTAKES

SELECTION CRITERIA: FIELD OF STUDY

IF YOU ARE IN FIRST YEAR WH	ICH DEGREE COURSE ARE	YOU CURRENTLY STUDYING?
Agricultural Science	BSc Mathematics	Chemical Engineering
Electrical Engineering	BSc Physical Sciences	BSc Actuarial Sciences
Mechanical Engineering	BSc Biological Sciences	BSc Computer Sciences
BSc Statistics	None of the Above	
SELECTION CRITE	RIA: ACADEMIC	RESULTS
WHAT WAS YOUR ACADEMIC 0% - 59% 60% - 64%	AVERAGE IN YOUR LAST E	EXAMS?
SELECTION CRITE	RIA: INCOME	
WHAT IS YOUR GROSS HOUSE	EHOLD INCOME PER MONTH	H?
R0 - R5,000 pm	R5,001 - R10,000 pm	R10,001 - R15,000 pm
R15,001 - R20,000 pm	R20,001 - R25,000 pm	R25,001 - R30,000 pm
More than R30,000 pm		



APPLICATION FORM FOR 2020 INTAKES

APPLICANT INFORMATION

WHERE DID YOU HEAR ABOUT THIS SCHOLARSHIP?		
Referred by individual Company School Website		
Social Media Please specify:		
FIRST NAME:		
PREFERRED NAME		
SURNAME		
GENDER Female Male		
ID NUMBER		
DATE OF BIRTH dd/mm/yyyy		
RACE African Asian Coloured Indian White		
DO YOU HAVE A PHYSICAL DISABILITY? Yes No		
If yes, please specify		
DO YOU HAVE A CRIMINAL RECORD? Yes No		
HOME LANGUAGE Afrikaans English IsiNdebele (Ndebele)		
IsiXhosa (Xhosa) IsiZulu (Zulu) Northern Sotho (Sepedi)		
Sesotho (Southern Sotho) Setswana (Tswana) SiSwati (Swati)		
Tshivenda (Venda) Xitsonga (Tsonga)		
IS YOUR HOME IN A RURAL OR URBAN AREA?		
URBAN (WITHIN A CITY)		
RURAL (AREA LOCATED OUTSIDE OF A TOWN/SMALL SETTLEMENT)		
DO YOU LIVE IN A FORMAL OR INFORMAL STRUCTURE?		
Formal Informal		



APPLICATION FORM FOR 2020 INTAKES

APPLICANT INFORMATION

LANGUAGE OF INSTRUC	TION Afrikaans	English	IsiNdebele (Ndebele)
siXhosa (Xhosa) IsiZulu (Zulu) Northern Sotho (Sepedi)			
Sesotho (Southern Sotho	o) Setswana (1	swana) SiSwat	ti (Swati)
Tshivenda (Venda)	Xitsonga (Tsonga)	
CONTACT DETAILS Email address			
Phone number			
HOME ADDRESS			
Address			
Address line 2			
City/Town			
Postal code			
Province			
PLEASE WRITE A SHORT A SCHOLARSHIP	NOTIVATION AS TO V	VHY YOU NEED TO B	E CONSIDERED FOR THIS



APPLICATION FORM FOR 2020 INTAKES

ACADEMIC INFORMATION

NAME OF CURRENT SCHOOL / TERTIARY INSTITUTE	
HAVE YOU APPLIED AND BEEN ACCEPTED TO ANY TERTIARY INSTITUTIONS FOR 2020?	
Yes No If yes, please provide details	
Yes No If yes, please provide details	NS FOR 2020
HOW FAR IS THE TERTIARY INSTITUTE THAT YOU WILL BE ATTENDING NEXT YEAR FRO	M VOLID
PLACE OF RESIDENCE? KM	W TOOK
HAVE YOU COMPLETED AN ASSESMENT OF YOUR ABILITIES, PERSONALITY AND CAINTERESTS (PSYCHOMETRIC TESTS)? Please specify the test name/s and date completed:	AREER
GRADES ACHIEVED IN YOUR LAST EXAMS - JUNE 2019	
Subject	%



APPLICATION FORM FOR 2020 INTAKES

PARENT / GUARDIAN INFORMATION

FATHER/STEPFATHER/GUARDIAN:
FIRST NAME:
SURNAME
MARITAL STATUS: SINGLE/MARRIED/ DIVORCED/WIDOWED
EMPLOYED Yes No
PENSIONER Yes No
CONTACT DETAILS
Email address
Phone number
MOTHER/STEPMOTHER/GUARDIAN:
FIRST NAME:
SURNAME
MARITAL STATUS: SINGLE/MARRIED/ DIVORCED/WIDOWED
EMPLOYED Yes No
PENSIONER Yes No
CONTACT DETAILS
Email address
Phone number
CONTACT DETAILS OF PRIMARY CARETAKER:
FULL NAME:
Email address
Phone number



APPLICATION FORM FOR 2020 INTAKES

RELATION AGE

FINANCIAL DECLARATION

PLEASE STATE THE COMBINED GROSS MONTHLY INCOME FOR YOUR

HOUSEHOLD. (This is the total of all gross salary earnings, wages, grants, pensions and any other earnings i.e. rent earned, maintenance contribution etc.)

_

NAME AND SURNAME

PROVIDE US WITH THE NAMES OF THE INDIVIDUALS IN YOUR HOUSEHOLD. (PEOPLE THAT LIVE WITH YOU)

Please confirm the financial contributors of your household	Rand Amount per month
Please confirm the financial contributors of your household Mother's Income	Rand Amount per month R
Mother's Income	R
Mother's Income Father's Income	R R
Mother's Income Father's Income Guardian's Income	R R R
Mother's Income Father's Income Guardian's Income Pensions	R R R
Mother's Income Father's Income Guardian's Income Pensions Grants	R R R R



APPLICATION FORM FOR 2020 INTAKES

QUESTIONS ABOUT YOU

MAD Leadership Foundation believes it is necessary and essential that you apply for as many scholarships as possible and will not penalise you if you have applied for any other scholarships, bursaries or financial assistance.

or location by, bottom of milaricial assistance.	
HAVE YOU APPLIED FOR OTHER BURSARIES OR FINANCIAL AID?	
No Yes Please state which scholarships and submission date.	Accepted
	Y
	Y
PLEASE LIST YOUR EXTRA-CURRICULAR ACTIVITIES AND HOBBIES. THESE COULD SPORTS YOU TAKE PART IN, CULTURAL ACTIVITIES OR INTERESTS THAT YOU HAVE	
DIFACE LICE AND A CHIEVEAUNIC (NOT ONLY A CARPANC) VOIL MICHT HAVE HA	D OVER
PLEASE LIST ANY ACHIEVEMENTS (NOT ONLY ACADEMIC) YOU MIGHT HAVE HATHE LAST 2 YEARS.	ID OVER



DESCRIBE IN SHORT YOUR COMMUNITY INVOLVEMENT, IF ANY. (PLEASE SAY NONE, IF	
OU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	DESCRIBE ANY LEADERSHIP POSITIONS YOU HAVE HELD WITHIN THE PAST 2 YEARS
YOU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
YOU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
OU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
OU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
OU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
YOU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
OU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	
OU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)	DESCRIBE IN SHORT YOUR COMMUNITY INVOLVEMENT IF ANY (PIFASE SAY NONE IF
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	YOU DO NOT TAKE PART IN ANY COMMUNITY SERVICE.)
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?	
	PLEASE TELL US IN SHORT HOW THIS SCHOLARSHIP WOULD IMPACT YOUR LIFE?



WHAT ARE YOUR GOALS AND AMBITIONS FOR YOUR LIFE?
HOW WOULD YOU DESCRIBE A GOOD LEADER?
WHAT WAS THE GREATEST CHALLENGE THAT YOU HAVE FACED? HOW DID YOU OVERCOME IT?



IT'S 2029, WHAT DOES YOUR IDEAL SOUTH AFRICA LOOK LIKE.	
YOU'RE PRESENTING AT AN INTERNATIONAL CONFERENCE ON LEADERSHIP, IN 50 WORDS WRITE THE DESCRIPTION THAT WOULD BE USED TO INTRODUCE YOU.	
IF THERE IS ANYTHING THAT YOU WOULD LIKE TO SHARE THAT WAS NOT COVERED IN THE APPLICATION FORM, PLEASE DO SO IN THE SPACE BELOW:	



APPLICATION FORM FOR 2020 INTAKES

SUPPORTING DOCUMENTS TO BE SUBMITTED

PLEASE ENSURE THAT THE FOLLOWING RELEVANT AND CERTIFIED DOCUMENTATION IS SUBMITTED TOGETHER WITH YOUR COMPLETED APPLICATION FORM:

PLEASE TICK THE BOXES BELOW TO CONFIRM THAT YOU HAVE SUPPLIED ALL THE REQUIRED DOCUMENTATION.

	A certified copy of your Identity document
\Box	A copy of your 2 (two) latest academic transcripts or exam results;
	A copy of your parents/legal guardians Identity documents;
	A copy of official payslip of each of your parents/ legal guardians;
	If your parents or the person who supports you or your legal guardian is retired, please provide a copy of an official pension slip or bank statement showing pension payment;
	A copy of a SASSA letter if any of your family members are receiving a social grant and are also contributing to your household income.

PLEASE NOTE:

IF YOUR APPLICATION IS INCOMPLETE IT WILL NOT BE CONSIDERED. WE WILL NOT BE ABLE TO FOLLOW UP ON INCOMPLETE APPLICATIONS.