



# APPLICATION FOR BURSARY

**Important:** Not all who apply are interviewed. Please complete this form as thoroughly as possible as this is our only indication of your potential at this stage.

**Closing date:** 31 July

**RETURN ADDRESS:** Student Development Department, P O Box 1091, Johannesburg, 2000 or

**EMAIL TO:** [bursaryqueries@eskom.co.za](mailto:bursaryqueries@eskom.co.za)

Surname

Mr/Miss/Ms

First names

Intended field of study

Major subjects

Institution you wish to attend

Study year next year (eg I of II)

Present postal address

Postal Code

Code

Telephone

Permanent postal address

Postal Code

Code

Telephone

Permanent home address

Code

Cell:

**CONFIDENTIAL**







## 7 Interests and hobbies

Give details of sporting activities, group activities and hobbies with position attained (if any)

### 7.1 Sport

### 7.2 Outstanding achievements

### 7.3 Cultural activities (eg. Youth society, private clubs, etc.)

### 7.4 Hobbies (eg. Photography, electronics, etc.)

## 8 Relative in Eskom's service

### 8.1 Name

### 8.2 Relationship

### 8.3 Where employed

### 8.4 Position

### 8.5 Code

Telephone

## 9 Particulars of parent or guardian

### 9.1 Name

### 9.2 Relationship

### 9.3 Occupation

### 9.4 Employer

### 9.5 Business address

Postal code

### 9.6 Code

Telephone

**10 General**

**10.1 Condition of health** Good  Fair  Poor

**10.2 Give details and dates of operations, serious illnesses and/or mental and physical defects**

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**10.3 Do you have a valid drivers licence ?** Yes  No  **State class of vehicle**

**10.4 Have you applied for or do you intend applying for another bursary?** Yes  No

**If so, give details**

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**10.5 Applications in response to**

Advertisement	<input type="checkbox"/>	Newspaper and date	<input type="checkbox"/>
Recommended	<input type="checkbox"/>	By	<input type="checkbox"/>
Careers exhibition	<input type="checkbox"/>	Venue and date	<input type="checkbox"/>
School/university	<input type="checkbox"/>	Name	<input type="checkbox"/> Town/City <input type="checkbox"/>
Other (specify)	<input type="checkbox"/>		

**10.6 Describe in your own words why you have chosen this of study and career.**

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**I declare that the above particulars are true and correct and understand that any false or incomplete information may constitute grounds to cancel immediately.**

**Signature of applicant**

**Date**

**Signature of parent or guardian if applicant is minor**

**Date**

**NB 1. Responsibility for return of original documents or their loss cannot be accepted.**

**2. Your appointment at Eskom would be subject to a medical report.**