

APPLICATION FORM

CLOSING DATE: 1 September 2017 (Eastern Cape)

I. IMPORTANT REQUIREMENTS - Scholars that meet the following criteria may apply:

- Currently in Grade 6 (2017)
- 12 years or younger in 2017
- Attaining an average of 70% and above in their latest academic report
- Attaining 70% and above for Mathematics, Natural science and English
- Demonstrate Financial need: household gross income combined not exceeding R20 000.00 per month.

2. APPLICATION ATTACHMENT CHECKLIST

(mark with a tick once all documents have been attached)

- Certified copy of scholar's birth certificate
- Certified copy of scholar's final Grade 5 report
- Certified copy of scholar's Grade 6 term 2 report
- Certified copies of Parent/Guardian(s) ID
- Certified copy of latest Payslip (for both parents/guardian, if applicable)
- Certified copy of SASSA Letter of Confirmation (if applicable)
- Latest 3 months bank statement
- Parents/Legal guardian signature (page 5)
- Certified copy of Study Permit (if applicable)
- Certified copy of residential status (for applicants who are foreign nationals)
- If recently unemployed, a certified letter of retrenchment or termination letter
- An affidavit
- If self-employed please submit the Annual financial statements of your business

IMPORTANT NOTICE TO PARENTS/GUARDIANS/CAREGIVERS

- Submitting an application form does not guarantee the awarding of the scholarship
- Applicants need to qualify and complete the selection process before being considered for the scholarship. The decision to award the scholarship rests solely with the Student Sponsorship Programme.
- Incomplete applications and applications that do not meet the SSP criteria will be rejected. In these cases, no correspondence will be entered into. Only qualifying applicants will be contacted.
- Foreign nationals attending South African schools need a valid study permit in order to apply.

SECTION A - APPLICANT INFORMATION (to be fully completed) - GAUTENG

Surname:	_____										
First Names:	_____										
Birth Date: (Day)	____ / _____ (Month) / _____ (Year)										
Country of Birth:	_____										
Gender: Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Nationality:	_____						
Race: African	<input type="checkbox"/>	White	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Coloured	<input type="checkbox"/>	Other	<input type="checkbox"/>	Please specify	_____
Phone Numbers: (Mobile)	_____	(Home)	_____								
Permanent Physical Address:	_____										
Current School Name:	_____	Current Grade:	_____								

SECTION B - PARENT/CAREGIVER/GUARDIAN INFORMATION

(to be completed by first in contact person)

PARENT/CAREGIVER/GUARDIAN I

Full name and Surname:	_____										
Relationship to Applicant:	_____										
ID Number:	_____	Nationality/Citizenship:	_____								
Country of Birth:	_____										
Gender: Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Marital Status:	_____						
Race: African	<input type="checkbox"/>	White	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Coloured	<input type="checkbox"/>	Other	<input type="checkbox"/>	Please specify	_____
Physical Address:	_____										
Phone Numbers: (Mobile)	_____	(Work)	_____								
Email:	_____	Employer:	_____								
Position:	_____	Gross Monthly Income:	_____								



Full name and Surname: _____

Relationship to Applicant: _____

ID Number: _____ Nationality/Citizenship: _____

Country of Birth: _____

Gender: Male Female Marital Status: _____

Race: African White Indian Coloured Other Please specify _____

Physical Address: _____

Phone Numbers: (Mobile) _____ (Work) _____

Employer: _____

Position: _____ Gross Monthly Income: _____

SECTION C - HOUSEHOLD EXPENSES AND INCOME DETAILS

Number of people in the household, including yourself: _____

Other income: R _____ Total Monthly Expenditure: R _____

Please specify the source of "Other Income" (if applicable)

Your family's expenditure covers the following items (please tick):

Home rental or bond	<input type="checkbox"/>	Clothing and other accounts	<input type="checkbox"/>	Water and Electricity Bills	<input type="checkbox"/>
Vehicle repayment & Insurance	<input type="checkbox"/>	Personal Loans or Credit Card	<input type="checkbox"/>	Entertainment	<input type="checkbox"/>
Transport	<input type="checkbox"/>	Medical Aid	<input type="checkbox"/>	Groceries	<input type="checkbox"/>
Life Insurance	<input type="checkbox"/>	University Fees	<input type="checkbox"/>	Child Maintenance	<input type="checkbox"/>
Pension or Provident Fund	<input type="checkbox"/>	Telephone Bills	<input type="checkbox"/>	Other	<input type="checkbox"/>

PLEASE NOTE THE FOLLOWING:

The gross monthly income received by each parent/caregiver/guardian must be declared. Any income from other sources, not stipulated on a Payslip must also be declared in the other "Other income" section. This includes, but is not limited to the following: child support, pension grant, disability grant, child maintenance, life or other insurance monies, income received from government tender processes, income from self-employment/private business, income from informal trading and any commission earned over and above the regular income. Adults who live with the scholar and are caregivers to the scholar but do not contribute directly to the scholar's living costs must still be included as a primary caregiver if they contribute in other ways to the household.

All expenditure with the scholar's household must also be recorded. This includes all monthly expenditure such as rental/bond payments, car instalments, groceries, school fees, transport, clothing and other accounts, etc. Please tick all relevant items included in your monthly expenditure.



THE APPLICATION FORM

Section A - Scholar Information:

Please complete this section fully. It is important to fill in all the details. The demographic questions and the details about the scholar's current school asked in this section are for identification, research and statistical purposes.

Section B - Parent/Caregiver/Guardian Information:

This section is included to establish a primary contact person and to identify all the primary caregivers of the scholar in question. All who fit in the following categories are considered primary caregivers and must be listed in this section:

- All parents.
- Legal guardian/caregiver.
- People who act in the place of a parent and who live with the scholar most of the time.
- People who act in the place of a parent, who do not live with the scholar, but who share full financial responsibility of the scholar.

The name and contact details of the parent/caregiver/guardian's spouse or partner must also be included. The details of the parent/caregiver/guardian's employment and the number of the people in any one household are important for statistical purposes and assist us in determining the financial need of any particular family.

IMPORTANT NOTICE:

If awarded the SSP Scholarship, the successful candidates will be required to attend school at SSP selected partner schools. Tuition and a small stipend to cover books, uniforms and stationery, will be payable by SSP. Parents will be responsible for transport to school and daily meals.

Completed application forms (pages 2-4) must be emailed to scholarship@ssp.org.za or faxed to +27 86 680 2307 on or before 1 September 2017 with all necessary documentation attached (checklist marked). The sole right of selection lies with the Student Sponsorship Programme.

SECTION E - (to be completed by the head of the household)

Where did you hear about SSP? School Newspaper Radio Word of Mouth Internet

Other _____

DECLARATION

I, (Full names), _____ sign to acknowledge that I understand the terms and conditions set out in this document, that the information I have provided is true and accurate, and that the written work submitted is the work of the applicant, unaided by any other person and is written in the applicant's own hand.

Signed: _____ Date: _____

