



# 2024 SIBLING REBATE BURSARY APPLICATION

**Closing Date: 6 May 2024**

Please write CLEARLY and complete the application in full. Any information omitted will prejudice the application. Only complete applications will be processed, considered, and informed of the outcome of the application.

The rebate applies only to undergraduate full-time study students:

- who are South African citizens or has South African permanent residency.
- who has siblings at UCT also studying towards a full-time undergraduate degree.
- whose total gross family income is between R600 000 and R750,000.
- this application does not replace non-application to NSFAS for funding; applications from NSFAS and Gap eligible students will not be considered.
- where the student or siblings are not in receipt of financial assistance, bursaries, scholarships, sponsorship or the UCT Staff Tuition rate.

Full details of the Sibling Rebate Bursary Policy are available in the Fees Handbook and on the web at [www.uct.ac.za](http://www.uct.ac.za)

## 1. STUDENT PERSONAL DETAILS

Personal Details	Sibling 1	Sibling 2	Sibling 3
Student Number			
Peoplesoft EmplId			
First Name			
Surname			
Cell Number			
Degree			
Year of study in 2024			

## 2. PARENTAL INFORMATION

Personal Details	Father	Mother
Name		
Surname		
Identity Number		
Marital Status		
Cell Number		
Home Address		
Employer Name		
Occupation		
Gross earning per annum	R	R

- If divorced please submit a copy of your divorce agreement and proof of maintenance
- Attach most recent salary or wages slips

UCT WILL TAKE LEGAL ACTION IF SIGNATURES OR INFORMATION HAVE BEEN WILLFULLY FORGED OR FALSELY GIVEN. INCOMPLETE AND UNSIGNED FORMS CANNOT BE CONSIDERED.

**DECLARATION BY BIOLOGICAL PARENT/PARENTS:**

(To be completed by parent/parents or legal guardian even if student is over 21 years of age)

I \_\_\_\_\_ and I \_\_\_\_\_  
(Mother) (Father)

declare that the information contained in this application is true to the best of my/our knowledge and belief I/we have submitted this information knowing that, if tendered in evidence, I/we would be liable for prosecution if I/we willfully state herein anything which I/we know to be false or which I/we do not believe to be true. In the interests of good governance and accountability for Public Funds, I/we agree that the University may request my/our individual profile/s from the Transunion Credit Bureau to verify my/our employment details.

\_\_\_\_\_  
(Signature Mother) (Signature Father) Date: 

D	D	M	M	Y	Y	Y	Y
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As witnessed by \_\_\_\_\_ Date: 

D	D	M	M	Y	Y	Y	Y
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**DECLARATION BY STUDENTS:** We \_\_\_\_\_ and \_\_\_\_\_

\_\_\_\_\_ and \_\_\_\_\_ hereby declare that the information contained in this application, including the information about our parents/legal guardian is true to the best of our knowledge and belief. We have submitted this information knowing that, if we willfully state herein anything which we know to be false or which we do not believe to be true, we may be declared ineligible for the rebate, any rebate already granted may be withdrawn and disciplinary action may be taken against us, either in the university courts or civil courts. We further undertake to inform the Student Financial Aid Office of any change in circumstances. We acknowledge that should we fail to do so and continue to receive the rebate to which we would no longer be entitled to by reason of changed circumstances, the University may seek recourse against us.

\_\_\_\_\_  
(Signature of Sibling 1) Date: 

D	D	M	M	Y	Y	Y	Y
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\_\_\_\_\_  
(Signature of Sibling 2) Date: 

D	D	M	M	Y	Y	Y	Y
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\_\_\_\_\_  
(Signature of Sibling 3) Date: 

D	D	M	M	Y	Y	Y	Y
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**Please return by courier to: The Manager, Student Financial Aid, Level 3, Kramer Law Building, Middle Campus, University of Cape Town, Private Bag X3, Rondebosch 7701**

**Or email: [FinancialAid@uct.ac.za](mailto:FinancialAid@uct.ac.za)**