



#### ABOUT THE BURSARY: TOMORROW TRUST

#### WHO CAN APPLY

## Students who are studying an undergraduate degree.

- Applicants must be between 18-25 years of age.
- Applicants must be South African citizens.
- Applicants must be pursuing a Full-Time undergraduate Degree.
- Must be a full-time student in 2024.
- Must meet the financial qualification criteria combined gross family income of up to R600 000 per annum.
- Preference will be given to students as defined by the BBBEE Act.

## **HOW TO APPLY**

Please read these notes and instructions carefully before completing the form. Be sure to read every section and ensure your information is accurate.

- Applications that are incomplete and that include misrepresentations will immediately be disregarded.
- Please ensure that you attach ALL of the Required Documents- Clear copies of all documents must be submitted.
- Proof of registration and acceptance at the University must be supplied before being accepted as a beneficiary of the Tomorrow Trust.
- It is your responsibility to apply for entrance to your intended course and university and to ensure that you can meet the entrance requirements stipulated for your course.
- Please ensure that you complete all the sections of this application form.
- You will be advised if your application is unsuccessful. Only shortlisted applicants will be invited to interviews.
- If you don't hear from us within four months of the closing date, please consider your application unsuccessful.

# **SUPPORTING DOCUMENTATION REQUIRED:**

- A copy of your South African ID must be certified by a Commissioner of Oath.
- Motivational Letter outlining your background story, why you have chosen your field of study indicated, your interests and achievements, and why you feel you should be

- selected by the Tomorrow Trust for this opportunity.
- Pay slips or grant slips from all your parents or legal guardians (an affidavit must be produced if a pay slip does not exist)
- Declaration that you are not employed and have not received funding for 2024- this must be certified by a Commissioner of Oath.
- Death certificates (if applicable an affidavit can also be submitted)
- Grade 12 results.
- Undergraduate academic transcript.
- Updated fee statement.
- Declaration: No previous funding has been accepted.

#### SUBMISSION OF DOCUMENTS:

 Scanned to via email with the reference Undergraduate Bursary 2024 to info@tomorrow.org.za

For queries, please contact us on 011 447 7707 during office hours.



# **Student Application**

Date of Application:

APPLICANT GENERAL INFORMATION					_		
Surname:		F	First Names:		ID Number:		
Street Address:							
Town/City:		F	Province:		Postal Code:		
Municipality							
Date of Birth:		(	Gender:	Male □	Fe	male□	
Contact Phone no:			E-mail Address:				
Other contact numbers: (Please provide name/ relationship to you)		·					
Are you currently attending a tertiary institution?	☐ Yes ☐ No			What will be your academic year of study in <b>2024</b> (Please tick below)?  1 <sup>st</sup> □ 2 <sup>nd</sup> 3 <sup>rd</sup> □ 4 <sup>th</sup> Honours			
Which course are you enrolled for:							
Which institution are you currently attending:							
Province of Institution:							
Municipality of Institution:							
Have you ever applied to us before?		YES	NO 🗌	If so, when?			
Do you have a criminal record?		YES	NO 🗌	If yes, explain			
Are you or will you be registered with the disabilities unit at your institution?		YES	NO 🗌	If yes, explain			
Are you currently receiving funding from a bursary, loan etc?		YES	NO 🗌	If yes, from who?			
Have you applied for funding elsewhere?		YES	NO 🗌	If yes, where?			

EDUCATIONAL BACKGROUND										
Name of High School:										
Province:										
Municipality:										
PREVIOUS TERTIARY EDUCATION										
Institution attended:		Qualification enrolled for:								
Did you graduate from the course?	ne		If YES, in what year?							
PERSONAL HISTORY										
Where are you from?			How many people do you live with?							
Who are your legal guardians and what is the relationship to you (E.g. mother, sister etc):	eir									
Are your legal guardians currently employed:			If yes, what is their net salary each month:							
Is anyone else you live w currently employed:	ith									
Are either of your parent deceased (please circle):	S Mother	Father	Phone no. of guardian or parent/s	( )						
Do you receive any other financial assistance (E.g. Care organisations, grant			Please explain:							
parents/guardians		Please state briefly nature of illness:		Are they receiving medical care:						
Household Composition										
In the table below please list all the people who live with you (excluding yourself).  Name Relationship Age Education Level Occupation										
Name Relationship		Age	Education Level	Occupation						

DISCLAIMER AND SIGNATURE							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to sponsorship, I understand that false or misleading information in my application or interview may result in me being terminated from the program and may result in me being held responsible for any financial support received/due.							
Signature				Date			