



GREATER TZANEEN MUNICIPALITY
GROTER TZANEEN MUNISIPALITEIT

P.O. BOX 24

TEL: 015 307 8000

TZANEEN 0850

FAX: 015 307 8049



FINANCIAL ASSISTANCE APPLICATION

- Please use a black pen
- Mark with an x where applicable

SECTION A: PERSONAL DETAILS

Surname: _____ **Mr. /Miss/Ms:** _____

Fist names: _____

Identity Number: _____

Date of birth: _____ **Place of birth:** _____

Race: Black Coloured White Other

Marital status: Single Married

Gender: Male Female

Disability: Yes No

If yes, please specify: _____

Nationality: _____

Home Language: _____

Physical Address: _____

Postal Address: _____

Cell Phone number: _____

E-mail: _____

SECTION B: DETAILS OF PARENT OR GURARDIAN

Surname: _____

First names: _____

Identity Number: _____

Marital status: Single Married

Relationship: _____

Occupation: _____

Employer: _____

Work Physical Address: _____

Work Telephone Number: _____

Cell Phone Number: _____

Number of Dependants: _____

PARENT/GUARDIAN/SPOUSE

Surname: _____

First names: _____

Identity number: _____

Marital status: Single Married

Relationship _____

Occupation: _____

Employer: _____

Work Physical Address: _____

Work Telephone Number: _____

Cell Phone Number: _____

Number of Dependants: _____

Combined Monthly Income Levels: R0-R500 () R5 000-R32 000 () R12 000 and Above ()

SECTION C: EDUCATION

Name of School/Tertiary institution: _____

Grade 12 () Tertiary Year () _____

Physical Address: _____

Telephone Number: _____

Resent Results: Please attached certified copies of your recent academic record.

SECTION D: CURRENT/DESIRED FIELD OF STUDY AT TERTIARY LEVEL

Name of institution: _____

Bachelors Degree/Diploma _____

Academic Field: _____

Provincial/Student Number: _____

SECTION E: DECLARATION

I, the undersigned, declare that the information given is correct and understand that should I receive Financial Assistance, I will fully comply with all provisions of the Greater Tzaneen Municipality External Financial Assistance Policy.

Signature:

Date: _____

Documents Required

1. Please ensure that you have attached the following documents:
 - Detailed Curriculum Vitae
 - Recent Academic Record
 - Certified copy of identity Documents
 - Provisional Admission letter or Proof of Registration
 - Proof of Parent (s)/Guardian's Income
 - Proof of Residence
 - Motivation as to why the Financial Assistance should be awarded to you 300-350 (words)

2. Closing date for the application is 3 January 2014
3. Please don't send original documents, attach certified copies
4. Complete forms must be sent to:

The Municipal Manager
The Greater Tzaneen Municipality
PO Box 24
Tzaneen
0850

Or

May be hand delivered to:

38 Agatha Street, Civic Centre Building, Tzaneen. Office number 102.