NELSON MANDELA

UNIVERSITY

Sport Bursary Application [This is not an application form to study at the Institution]

1 : Personal Information				
Title:				
Student/ Reference Number:				
Surname:Full Names:				
Identity Number:				
Home Language:				
Home Address:				
Code:				
Postal Address:				
Code:				
Telephone No: (Code) Number:				
Fax No: (Code) Number:				
E-Mail: Cell No:				
Date Of Birth: Age:				
Parent/Guardian:(Tel/Cell):				
2 : Academic Information				
University or school Attended:				
Highest Educational Qualification Obtained:				
Year Obtained:				

NSC / MATRIC SUBJECTS		LEVEL OF ACHIEVEMENT/ SYMBOL		%	
other tertiary institution	t of your latest examination results must a ons must please attach a certified copy o urse:	f their academic re	cord.		
	2. Co. and A.ahiaaaa				
3: Sport Achievements					
SPORT	Best Performance (TIMES, HEIGHTS & PLACES)		Year achieved	Event or Meeting	
				<u> </u>	
SPORT	REPRESENTATIVE TEAMS [National-SA Schools-Provincial-1st Team]		Position	Year represent- ed	
	oursary applicants MUST undergo a Soco				
4: Other activities or Leadership positions					
Return form to:					

MADIBAZ Sport, P.O. Box 77 000, Nelson Mandela University, Port Elizabeth, 6031

Fax nr. 0865 0033 58

Submission Date: As soon as possible Closing Date: End of September