



**FIRST YEAR STUDENT FINANCIAL ASSISTANCE
APPLICATION FORM - 2016**

**THE UNIVERSITY OF THE WESTERN CAPE
PRIVATE BAG X17
BELLVILLE
7535**

**FINANCIAL AID OFFICE
TEL: 021 959 9753**

STUDENT NO																								
SURNAME																								
FIRST NAMES																								

IMPORTANT NOTES

- Application for financial assistance does not guarantee assistance.
- You might be expected to make a contribution towards your fees depending on the EFC (Expected Family Contribution) as per FA Means Test.
- Preference for funding will be given to Full time Registered students
- NSFAS do not pay for private accommodation for local students
- Should you be staying in private accommodation, please note that the lease agreement is between you and the landlord and therefore the University cannot be implicated in any arrangement with a third party. (Subject to any changes without prior notice)
- This form provides the University with personal information and is accorded the strictest confidentiality. It is used to assess your **Financial Eligibility** for UWC assistance.
- Misrepresentations, omissions or false information will result in rejection. Should you willfully forge documents or submit false information (commit fraud) UWC will take action against you.
- Failure to provide required supporting financial documentation (e.g. Salary slips, pension slips, et.) will result in your application being rejected.
- We advise you to apply to other bursary donors as well. The UWC bursary brochure can be obtained from the Financial Aid Helpdesk, Prefabs behind the Administration Building.
- No faxed OR e-mailed (scanned) documentation will be accepted.
- The Financial Aid Office will inform you via the student e-mail of the result of your application.
- To avoid disappointment and to ensure that you receive correspondence from the University, please ensure that your contact details on the University database is correct.

STAFF MEMBER: _____

STAFF NR:

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<p>DATE OF SUBMISSION</p>



UWC FIRST YEAR FINANCIAL ASSISTANCE APPLICATION 2016
Closing date: 29 FEBRUARY 2016

FINANCIAL AID OFFICE
TEL: 021 959 9753

- APPLICATIONS ARE ONLY OPEN TO SOUTH AFRICAN CITIZENS AND PERMANENT RESIDENTS
- PROOF OF INCOME SHOULD NOT BE OLDER THAN 3 MONTHS OF SUBMISSION
- ALL COPIES SHOULD BE CERTIFIED AS TRUE COPIES WITHIN 3 MONTHS OF SUBMISSION
- IF SUPPORTED BY A GUARDIAN, THE DEATH CERTIFICATE OF PARENT(S) OR A LETTER FROM SOCIAL SERVICES SHOULD BE INCLUDED
- INCLUDE PROOF OF REGISTRATION OF SIBLING (S) STUDYING AT TERTIARY INSTITUTION
- IF YOUR FAMILY IS FOSTERING A CHILD PLEASE INCLUDE COURT DECREE
- MARRIAGE CERTIFICATE OF APPLICANTS SPOUSE
- ONLY FULLY COMPLETED APPLICATION FORMS WILL BE ACCEPTED

STUDENT NUMBER

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IDENTITY NUMBER

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SURNAME

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FIRST NAMES

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GENDER

M	F
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MARITAL STATUS _____

COURSE OF STUDY _____

FULL -TIME STUDIES

PART TIME STUDIES

PERMANENT HOME ADDRESS _____

ADDRESS WHILE STUDYING _____

FOR OFFICIAL USE ONLY

INCOME 1		INCOME 2		INCOME 3		FAMILY MEMBERS	
STUDENTS		STAFF MEMBER		DATE ACCEPTED		DATE CAPTURED & VERIFIED	



G. DECLARATION BY BIOLOGICAL PARENT/SPOUSE/ COURT-APPOINTED GUARDIAN (To be completed by parent/spouse or legal guardian even if the applicant is over 18 years)

I _____ and/or I _____ declare that the information stated
(Mother/ Guardian/ Spouse) (Father/Guardian/Spouse)

in the application is true to the best of my knowledge and belief. I have submitted this information knowing that, if tendered in evidence, I would be liable for prosecution as set by the institutions regulations if I willfully state in it anything which I know is false or which I do not believe is true. In the interest of good governance and accountability for Public Funds,

- I agree that the University may request my individual profile from Transunion Credit Bureau to verify my employment details.
- I DO NOT agree that the University may request my individual profile from Transunion Credit Bureau to verify my employment details

(SIGNATURE MOTHER/GUARDIAN/SPOUSE)

(SIGNATURE FATHER/GUARDIAN/SPOUSE)

DATE

D	D	M	M	Y	Y	Y	Y
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H. STUDENT COLLECTION DECLARATION

I _____ hereby declare that this application with all necessary documentation
(STUDENT NAME AND SURNAME)

will be handed in by no later than the stipulated closing date. I acknowledge that the Financial Aid Office made the application available in due time and therefore will not accept any late applications.

(STUDENT SIGNATURE)

DATE

D	D	M	M	Y	Y	Y	Y
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I. FAMILY STRUCTURE DETAILS: Fill in details of all members of the household

	01	02	03	04	05
Full Name					
ID Number					
Relationship					
Dependent or Contributor					
Present Activity *					
Relationship					
Type of Income					
Annual Gross Income*					
	06	07	08	09	10
Full Name					
ID Number					
Relationship					
Dependent or Contributor					
Present Activity *					
Relationship					
Type of Income *					
Annual Gross Income*					

* Relationship – Myself, mother, father, spouse, grandparent, sister, brother, son, daughter

* Present Activity – Secondary -, primary school, employed, unemployed/self-employed, unemployed, studying

* Type of Income – Salary, wages, SASSA grant

* Annual Gross Income – Income (amount) before deductions



J. CHECKLIST: PLEASE TICK THE CHECKLIST TO ENSURE YOU ATTACHED ALL RELEVANT DOCUMENTATION

	Certified copies of birth certificates or ID's of all members of the family
	Certified copy of death certificate if applicable
	Proof of legal guardian if applicable
	Copy of parents full divorce agreement if applicable
	Single parents must provide us with an affidavit stating knowledge about information regarding other parent
	Unemployed siblings, ≤18yrs and not studying, must provide us with a letter from Department of Labour
	Sibling studying at FET College or at a tertiary institution must provide us with a proof of registration

IF PARENTS/GUARDIAN/SPOUSE ARE EMPLOYED

	Attach salary/wage slips of parent(s)/guardian(s)/spouse
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IF PARENTS/GUARDIAN/ SPOUSE ARE AN INFORMAL TRADER/HAWKER

	Proof of income
	Proof of lease agreement if renting accommodation

IF PARENT/SPOUSE/GUARDIAN ARE EARNING COMMISSION

	IRP5, IT3 and IT12 (last 2years)
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IF PARENT/GUARDIAN/SPOUSE OWN OR ARE MEMBERS OF A CC/PTY (LTD) AND/ OR SOLE PROPRIETOR (OWNER)

	An Income Statement, Balance Sheet, Cash Flow Statement, IT14 – Tax return for business (last 2 years)
	IT 12 – Tax return for the individual (last 2 years)
	IT3 – Income Tax Certificate from the Bank (last 2 year)

IF PARENTS/GUARDIAN/SPOUSE ARE UNEMPLOYED

	Official letter from the Department of Labour proving unemployment status
	Proof of how the family is supported
	If parent/guardian/spouse receives income such as pension/grant/maintenance/rental/interest from investment, submit proof please