



sport, arts & culture

Department:
Sport, Arts and Culture
REPUBLIC OF SOUTH AFRICA

NELSON MANDELA

UNIVERSITY

Faculty of Humanities

DEPARTMENT OF SPORT ARTS AND CULTURE SCHOLARSHIPS PROGRAMME - 2025

APPLICATION FOR A SCHOLARSHIP

N.B. IT IS ESSENTIAL THAT ALL INFORMATION REQUESTED ON THIS FORM BE SUPPLIED

Please supply and attach copies of the following documents:

- Copy of full academic record
- Certified copy of I.D.

It is most important to supply this documentation, as failure to do so may compromise your application.

PLEASE RETURN THE COMPLETED FORM AND ATTACHMENTS TO:

The Nelson Mandela University DSAC Administrator, Main Building, 3rd floor, 0301A, South Campus for the attention of Mr Nkululeko Mkosana

CLOSING DATE: 6 December 2024 @ 16:30 no late applications to be considered.

Applicant details

Name of applicant

Surname

Other names

Gender

Male

☐

Female

☐

Student number

Home Language

Address during
university semester

Address during
university vacation

Province

Email address:
(student & private)

Contact telephone
number

Date and place of
birth

Identity number

Marital status

Do you have

a disability/special Yes ☐

Needs? No ☐

Please specify the nature
of the disability
/special need

Employment details:

Are you employed? Yes ☐ No ☐

Type of occupation

Work Place

Work place Telephone

(*To be used for statistical purposes only)

Highest previous qualification

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Confirmed Scholarships or Bursaries (state the name and amount of the bursary):

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Study details:

Proposed course of study

Department/school

I, _____, hereby declare that the information stated in this application is true and correct to the best of my knowledge and belief. I have submitted this information knowing that, if I wilfully stated in it anything which I know to be false or which I do not believe to be true, I may be declared ineligible for this bursary and/or any sums already paid or granted to me may be withdrawn and will have to repay it. I also accept and give permission to the DSAC bursary Administrators at the Nelson Mandela University to retrieve and view all transcripts/academic records and student statement of accounts for the purposes of verification of applicant information and determining the eligibility of the applicant into the bursary scheme. I further undertake to inform the DSAC bursary Administrators at the Nelson Mandela University

☐ You will allow the DSAC bursary Administrators at the Nelson Mandela University and to verify your information with third parties.
(Tick box if you agree).

HAVE YOU REMEMBERED TO ATTACH?

Certified I.D. document?

Yes ☐ No ☐

Full academic record?

Yes ☐ No ☐

TO BE FILLED IN BY THE HEAD OF DEPARTMENT / DIRECTOR OF SCHOOL (kindly note: It is the applicant's responsibility to get this section completed by the HoD/DOS):

Comments:

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I support the above application:

Yes ☐ No ☐ (please tick)

Name (please print):

.....

Date:

Signature of HOD/DOS: