

2017 SIBLING REBATE BURSARY APPLICATION

Closing Date: 01 May 2017

Please write CLEARLY and complete the application in full. Any information omitted will prejudice the application. Only complete applications will be processed, considered and informed of the outcome of the application.

The rebate applies only to undergraduate full-time study students:

- who are South African citizens or has South African permanent residency;
- who has siblings at UCT also studying towards a full-time undergraduate degree;
- whose total gross family income is below R750, 000;
- where the student or siblings are not in receipt of financial assistance, bursaries, scholarships, sponsorship or the UCT Staff Tuition rate.

Full details of the Sibling Rebate Bursary Policy are available in the Fees Handbook and on the web at www.uct.ac.za

1. STUDENT PERSONAL DETAILS

Personal Details	Sibling 1	Sibling 2	Sibling 3
Student Number			
Peoplesoft Emplid			
First Name			
Surname			
Cell Number			
Degree			
Year of study in 2017			

2. PARENTAL INFORMATION

Personal Details	Father	Mother
Name		
Surname		
Identity Number		
Marital Status		
Cell Number		
Home Address		
Employer Name		
Occupation		
Gross earning per annum	R	R

- If divorced please submit a copy of your divorce agreement and proof of maintenance
- Attach most recent salary or wages slips

(Signature of Sibling 3)

UCT WILL TAKE LEGAL ACTION IF SIGNATURES OR INFORMATION HAVE BEEN WILLFULLY FORGED OR FALSELY GIVEN. INCOMPLETE AND UNSIGNED FORMS CANNOT BE CONSIDERED.

(To be completed by parent/par		tudent is over 2	21 years of age)
I	and	11	
(Mother)			(Father)
submitted this information know state herein anything which I/w	ving that, if tendered in evider ve know to be false or which I for Public Funds, I/we agree th	nce, I/we would I/we do not be at the Universi	of my/our knowledge and belief I/we have do be liable for prosecution if I/we wilfully lieve to be true. In the interests of good ty may request my/our individual profile/s
		Date:	D D M M Y Y Y Y
(Signature Mother)	(Signature Father)		
As witnessed by		Date:	D D M M Y Y Y Y
true to the best of our knowled herein anything which we know rebate, any rebate already gran	andandandatained in this application, includge and belief. We have subrate to be false or which we do not ented may be withdrawn and displaced to the control of the control o	nitted this info believe to be t sciplinary actio	andhereby nation about our parents/legal guardian is rmation knowing that, if we wilfully state rue, we may be declared ineligible for the on may be taken against us, either in the ont Financial Aid Office of any change in
-	e that should we fail to do so a	and continue to	receive the rebate to which we would no
(Signature of Sibling 1)		Date:	D D M M Y Y Y
(Signature of Sibling 2)		Date:	D D M M Y Y Y
		Data:	

Please return to: Manager, Student Financial Aid, Level 3, Kramer Law Building, Middle Campus, University of Cape Town, Private Bag X3, Rondebosch 7701