Met	tacom Foundation B All information is treate			m
	PERSONAL INFORMA	TION OF APP	LICANT	
SURNAME		FIRST NAME(S)		
INITIALS		PREFERRED NAME		
DATE OF BIRTH		ID NUMBER		
CELL PHONE NUMBER			EXPECTED GRADUATION YEAR	
CURRENT DEGREE				
UNIVERSITY			STUDENT NUMBER	
DEGREE DURATION			STARTING YEAR	
EMAIL ADDRESS				
HOME ADDRESS				
ADDRESS WHILE STUDYING				
	EDUCATION E	ACKGROUND)	
SCHOOL ATTENDED			YEAR GRADUATED	
Have you received of approved.	or applied for financial aid before	If yes, please	explain why it ended	or was not
Have you previously completed, please of	y pursued other studies? If yes, list explain why.	them and indi	cate whether comple	eted. If not

PERSONAL DEVELOPMENT & ACHIEVEMENTS
Leadership & Community Involvement Describe any leadership roles or ways you've contributed to your community (volunteering, mentoring, student organizations).
Sport Participation Have you been involved in any sports or physical activities? Share your role (player, captain, coach, etc.) and what it has taught you.
Hobbies and other interests What hobbies, passions, or personal interests do you enjoy outside of your studies?
Details of participation in cultural activities Have you taken part in cultural activities (music, art, drama, debate, traditional events)? Please describe your involvement and why it's meaningful to you.

FUTURE & MOTIVATION
Motivation Statement Please explain why you chose your course of study and why you believe you should be considered for a Metacom Foundation bursary.

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Metacom Foundation | 2026 Application Form

Plans for the future What are your goals for the future, and how do you see your studies helping you achieve them?
Additional Information Any other information that you would like to include to support your application.

			FI	NANC	IAL	INF	ORMAT	ION					
DETAILS OF OTHER	BURSAR	IES (this bursary ex	ccluded):									
LOANS	R		F	INANCIA	L INST	ITUTIO	NC		AVAILABLE A	ANNUAI	LLY	YES	NO
BURSARIES	R		١	NAME					AVAILABLE A	ANNUAI	LLY	YES	NO
ALTERNATIVE OPTIO		LABLE (e.g., bank l	oan by	parent)									
		ı	FAMI	LY INC	COM	E &	DEPEN	DENTS					
				SOUR	CES	OF	INCOM	Æ					
INFORMATION OF		INITIALS		SURNAM	ΛE			OCCUPAT	TON		GROSS	INCOME	p/m
FATHER													
MOTHER													
LEGAL GUARDIAN													
YOUR INCOME													
SPOUSE													
	E	DUCATIONAL	L COS	STS O	F 01	THE	R DEPE	NDENT	S OF INC	OME			
NUMBER OF FAMILY	MEMBER	RS DEPENDANT ON	ADULT	S			TERTIARY	′	SCHOOL		PRE-S	CHOOL	
NAME		SCHOOL			AMOL	JNT		UNIVERS	ITY		А	MOUNT	
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SIGNATURE OF APPLICANT

DATE

	BUDGET OF	ESTIMATED STUDY COSTS	
INCOME	RAND	EXPENSES	RAND
BURSARIES		TUITION	
LOANS		ACCOMMODATION	
CONTRIBUTION FROM PARENTS		MEALS	
OTHER		BOOKS	
		TRANSPORT	
		POCKET MONEY	
		OTHER (please specify)	
TOTAL INCOME		TOTAL EXPENSES	
	<u>.L</u>		L
I declare that the inform	ation provided is true	e and correct.	
☐ I consent to the use of m	y data for bursary co	nsideration.	
I understand that bursary	continuation is subj	ect to academic progress and Fou	undation rules.