



BURSARY APPLICATION FORM: 2ND / 3RD YEAR STUDENTS IN BACHELOR OF HEALTH SCIENCES (IMMUNOHEMATOLOGY)



INSTRUCTIONS FOR THE SUBMISSION OF APPLICATION FORMS

The South African National Blood Service (SANBS) will only consider your application if you have completed the form in full, and if the items mentioned below, as and where applicable, have been included with your application.

1. CHECKLIST OF DOCUMENTS/ITEMS TO BE INCLUDED WITH YOUR APPLICATION FORM

- | | |
|--------------------------|---|
| <input type="checkbox"/> | A certified copy of your final matric results. |
| <input type="checkbox"/> | Proof of acceptance at a registered and accredited tertiary institution. |
| <input type="checkbox"/> | Most recent academic report from the university. |
| <input type="checkbox"/> | An essay of 250 words to motivate your application (see page 4 of this form). |
| <input type="checkbox"/> | A certified copy of your South African identity document (ID). |
| <input type="checkbox"/> | 3 months' Payslip/bank statement of parents/guardian of the student. |

2. SELECTION CRITERIA

- Must be a student in Bachelor of Health Sciences with Immunohematology (Blood transfusion) as one of their elective subjects.
- Must be a South African citizen.
- Must be younger than 30 years old.
- Must have achieved an average pass mark of at least 65% in your current year of study.
- Preference may be given to students in financial need (unable to afford to attend university without a bursary – total household income not exceeding R600,000.00 per annum).
- Student must not receive financial support through any other bursary.

PLEASE MARK YOUR ANSWER WITH AN X (CROSS) WHERE APPLICABLE. For example:

Are you a South African Citizen	No		Yes	X
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SECTION 1: APPLICANT'S INFORMATION

ID No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Are you A South African Citizen?	<input type="text"/> Yes	<input type="text"/>	<input type="text"/> No	<input type="text"/>	Gender	<input type="text"/> M	<input type="text"/> F	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Surname	<input type="text"/>														
First Name(s) as Per Id	<input type="text"/>														
Date of Birth	<input type="text"/> Y	<input type="text"/> Y	<input type="text"/> Y	<input type="text"/> Y	<input type="text"/> M	<input type="text"/> M	<input type="text"/> D	<input type="text"/> D	Age on 1 January 2025	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Home Tel. No. (Landline)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Cell No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Email Address	<input type="text"/>														
Postal Address	<input type="text"/>														
	<input type="text"/>														
	<input type="text"/>														
	<input type="text"/>										Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Population Group	<input type="text"/> Indian	<input type="text"/>	<input type="text"/> Coloured	<input type="text"/>	<input type="text"/> African	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> White	<input type="text"/>		

SECTION 2: APPLICANT'S STUDY DETAILS

Highest Qualification Already Obtained	<input type="text"/>												
(e.g. matric/Grade 12 or N4)													
When Did You Matriculate?	<input type="text"/> Y	<input type="text"/> Y	<input type="text"/> Y	<input type="text"/> Y	Have You Included Your Matric Certificate?	<input type="text"/> Yes	<input type="text"/>	<input type="text"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Have You Included Your Latest Study Results?	<input type="text"/> Yes	<input type="text"/> Y	<input type="text"/> No	<input type="text"/> Y									
Name of University	<input type="text"/>												
Current Qualification That You Are Studying Towards	<input type="text"/>												
Student No.	<input type="text"/>												
(Remember to attach your university acceptance form)													
Mention any other bursaries you have applied for as well as any bursary grants that have already confirmed	<input type="text"/>												
	<input type="text"/>												
	<input type="text"/>												
	<input type="text"/>												

SECTION 3: PARENT/GUARDIAN'S DETAILS

Title (Mr, Mrs, Ms, Dr)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Are you a South African Citizen?	Yes	<input type="text"/>	No	<input type="text"/>	
Gender	<input type="text"/>	M	<input type="text"/>	F						
Surname	<input type="text"/>									
First name(s) as Per ID	<input type="text"/>									
ID No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Home/Work Tel No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Nature of relationship	<input type="text"/>									
Cell No	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email Address	<input type="text"/>									
Postal Address	<input type="text"/>									
	<input type="text"/>									
	<input type="text"/>									
	<input type="text"/>						Code	<input type="text"/>	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>									
Name of Employer	<input type="text"/>									
Joint Family Income Per Year	<input type="text"/>									

SECTION 5: WHERE DID YOU HEAR ABOUT THE SANBS BURSARY?

University/ University of technology	<input type="text"/>	Social media	<input type="text"/>
Word of mouth	<input type="text"/>	Other	<input type="text"/>

SECTION 6: APPLICANT'S DECLARATION

I declare that I am aware of and understand the selection criteria. I declare that the information supplied in this application is, to the best of my knowledge, true and correct. I understand that any false information will result in automatic disqualification.

Signature

Date

Closing date: 31 January 2025

Applications will not be accepted after the closing date.

If you have not been contacted within one (1) month after the closing date, please accept that your application was unsuccessful.