APPLICATION FORM FOR SORGHUM TRUST BURSARIES

I, the undermentioned student, hereby apply for a Sorghum Trust bursary to study for the following degree, at the university as mentioned, in order to complete the course/thesis stated in this application.

NAME OF INSTITUTION, DEGREE AND COUR	<u>5E</u>
(Name of Institution)	
(Course Enrolled for or Title of Thesis)	
Period and degree applied for:	
Two years for MSc students.* OR Three years for PhD students.*	
(* - Delete whichever is not applicable).	
PERSONAL PARTICULARS OF STUDENT	
(Title and full names)	(Identity Number)
(Telephone Number)	(Fax Number)
(Postal Address)	(Physical Home Address – Domicilium)
(e-mail Address)	(Cellphone Number)
NOMINATED MENTOR	
(Title and name)	(e-mail Address)
(Talaphana Number)	(Fay Number)

[NB PLEASE ENCLOSE A CURRICULUM VITAE, YOUR FULL PAST STUDY PARTICULARS, A SHORT SUMMARY OF THE INTENDED THESIS, AND A CLEAR COPY OF YOUR ID TO THIS APPLICATION]