



THE ASSOCIATION OF OLD RHODIANS BURSARY APPLICATION FORM – 2025

INFORMATION

The Association of Old Rhodians (AOR) bursaries are administered by the AOR Committee. Annually the committee awards bursaries to students at Rhodes University who are children and grandchildren of Old Rhodians (this includes Rhodes University permanent staff members). An award ceremony is held during the third term to present awards to the successful applicants.

There are no restrictions on the family gross income for these bursaries. **However, a means test is applied to determine the level of need, since this is a stipulation for some of the awards.** The duration of the bursary is one year.

Previous recipients **MUST** reapply each year to be considered.

SECTION 1: STUDENT INFORMATION

First time applicant? Yes ☐ No ☐ (please tick). If No, please state name of award.

Award Name*		Year and bursary value	
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Details of Applicant	
Surname	
First Name	
Identity number	
Student number	
Cell phone number	
For which degree are you registered?	
Email address	

CLOSING DATE: 25 April 2025

Submit to Student Financial Aid Office or email to finaid@ru.ac.za

Tel: 046 603 8248

DETAILS OF PARENTS / GUARDIAN or GRANDPARENT (who is an Old Rhodian)

*Student numbers have been allocated to all who studied at Rhodes University although your relative/guardian maynot be aware of this. If they do not know their old student number (or have forgotten) please email the Alumni Office at alumni@ru.ac.za, who will endeavor to help.

Surname													
Maiden name or name studied under at RU													
First Name/s													
Identity number													
Relationship to student													
Their Rhodes University student number*													
Their Rhodes University staff number*													
Their first year at Rhodes University													
Their field of study/degree													
Email													
Cell													

SECTION 2: PARTICULARS OF PERSON(S) RESPONSIBLE FOR PAYING YOUR FEES/LIVINGCOSTS?

Parent/Guardian		Self-Supporting *	
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* If you are self-supporting you will have to provide proof of being independent from your parents/guardian for more than 2 years. Proof can be in the form of salary slips from your employer, a bank statement/proof that you have sufficient funds (such as interest from investments or savings) which can be used towards your year of study at Rhodes University.

IF PARENT OR GUARDIAN, PROVIDE DETAILS OF ASSETS AND LIABILITIES OF FAMILY(ADDITIONAL INFORMATION MAY BE REQUESTED)

House Rented		Monthly Rental		
House owned		Value		Monthly Bond Repayments

Car		Value		Monthly Repayments	
Gross Income per month	Father/Guardian	<i>Initials & Surname</i>	R	<i>Job description</i>	<i>ID Number</i>
	Monthly salary				
	<i>(Id copy to be Provided + pay slip)</i>				

	Mother/Guardian Monthly salary (<i>ID copy to be provided + pay slip</i>)	<u>Initials & Surname</u>	R	<u>Job description</u>	<u>ID Number</u>
	Spouse/Live in partner (<i>ID copy to be provided + pay slip</i>)	<u>Initials & surname</u>	R	<u>Job description</u>	<u>ID Number</u>
	Total		R		

SECTION 3: STATE YOUR (Student) MONTHLY LIVING COSTS:
(Please indicate if you are staying at Res)

Rent		Water/Electricity		Books	
Food		Transport		Other	
				TOTAL	R

SECTION 4: LIST OF ALL FAMILY MEMBERS DEPENDENT ON FAMILY INCOME AND LIVING IN YOUR HOME. START WITH YOUR NAME:

Name	Age	Relationship	Occupation	Employed Yes/No	Income
1.					
2.					
3.					
4.					
5.					
6.					

SECTION 5: STUDENT LOANS/ FINANCIAL AID

Bank/Person/Institution	Year	Value	Current Balance
	Total		

SECTION 6: FUNDING, AWARDS, BURSARIES, SCHOLARSHIPS APPLIED FOR IN THE YEAR FOR WHICH THE AOR BURSARY WOULD BE GRANTED.

Name	Year	Value	Awarded Yes/No
		Total	

SECTION 7: MOTIVATION AND OTHER FINANCIAL INFORMATION THAT YOU WOULD LIKE THE COMMITTEE TO CONSIDER (Motivation must be attached if space provided is not enough): (COMPULSORY)

SECTION 8: DECLARATION BY APPLICANT:

I..... (full names and surname) have checked the information provided in this application and to the best of my knowledge the details given are complete and correct.

I understand that should any information be omitted or found to be incorrect and misleading the Committee, disciplinary action may be taken by the University against the applicant, which could result in expulsion. Any funding awarded to the applicant, will automatically be withdrawn.

Signature of applicant (student)..... Date.....

(In signature required if submitted via email)

SECTION 9: CHECKLIST: (I have provided all the documentation)

DOCUMENTATION		Please tick
1.	One certified copy of student’s and parents/guardians ID document or passport.	
2.	If you have studied before coming to Rhodes University, please provide academic transcripts from your previous University .	
3.	If your parents/guardians are deceased or divorced – provide a certified copy of the death certificate or divorce decree (including details of any maintenance payments). A sworn affidavit may be provided.	
4.	If parents/guardians are employed – provide the most recent pay slip for each person or a letter from the employer, giving full details of gross income and all other benefits, including net salary.	
5.	If parents/guardian are unemployed – a sworn affidavit signed by the unemployed person before a commissioner of oaths proving unemployment must be provided.	

6.	If either parents/guardian are pensioners – a certified copy of their pension slip must be provided. If your parents/guardian receives a state pension and slips are not available, a sworn affidavit indicating the amount received must be provided.	
7.	If either of your parents/guardian 1) works in the informal sector: provide a sworn affidavit with estimated monthly income. 2) own any business: provide an audited business statement with assets, liabilities, income, and expenditure.	
8.	If your spouse/live-in partner has indicated that they are employed or if you are on study leave – supply a copy of the most recent pay slips and Study Leave forms where applicable.	
9.	If you have indicated that you are self-supporting, please provide proof (e.g.: pay slips (if applicable), bank statements, proof of income from investments, savings etc. to show source of income for the year of study).	
10.	If you have a sibling that is also a student, please provide proof of their registration.	
11.	If you have dependents other than your spouse/live in partner, please provide details.	

PLEASE ENSURE THAT ALL THE ABOVE DOCUMENTATION, WHERE APPLICABLE, IS ATTACHED TO THIS APPLICATION FORM.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

For help or further information contact the Financial Aid Administrator on telephone 046 603 8248 or email finaid@ru.ac.za. Alternatively the Alumni Relations Office, Alumni House 046 603 8887 or email alumni@ru.ac.za.