





Student Bureau, Lucas Avenue, Makhanda, 6139, South Africa PO Box 94, Makhanda, 6140, South Africa t: +27 (0) 46 603 8248 e: finaid@ru.ac.za www.ru.ac.za



## THE ASSOCIATOIN OF OLD RHODIANS (previously, Old Rhodian **Union) BURSARY APPLICATION FORM**

#### **INFORMATION**

**SECTION 1: STUDENT INFORMATION** 

The Association of Old Rhodians bursaries are administered by the AOR Committee. Annually it awards a number of bursaries to students at Rhodes University who are children and grandchildren of Old Rhodians (including Rhodes University staff members). An award ceremony is held during the second term to present the awards to successful applicants.

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

# First time applicant? Yes No (please tick). If yes, please state name of award. Previous recipients MUST reapply each year to be considered. Award Name\* Year and bursary value

Details of Applicant							
Surname							
First Name							
Identity number							
Student number							
Cell phone number							
For which degree are you registered?							
Email address							

**CLOSING DATE: 15 April 2024** 

Submit to Student Financial Aid Office or email to finaid@ru.ac.zaTel: 046 603 8248

## **DETAILS OF OLD RHODIAN PARENTS/GUARDIAN**

\*Student numbers have been allocated to all who studied at Rhodes although your relative/guardian maynot be aware of this. If they do not know their old student number (or forgotten) please email <a href="mailto:alumni@ru.ac.za">alumni@ru.ac.za</a> who will endeavor to help.

Maiden Name or name studied under at Rhodes First Name/s Identity number Relationship to student Their Rhodes University student number* Their first year at Rhodes Their field of study/degree Email: Cell  SECTION 2: PARTICULARS OF PERSON(S) RESPONSIBLE FOR PAYING YOUR FEES/LIVINGCOSTS? Parent/Guardian  * 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 yourprevious 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 Own Value Monthly Bond Repayments  Car Value Monthly Repayments  Car Value Monthly Repayments  Car Value Monthly Repayments  Repayments																					
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Mother/Guardian	Initials & Su <u>rname</u>	R	Job description	ID Number
Monthly salary (Idcopy to be provided + pay slip)				
Spouse/Live in partner (Id copy to beprovided + pay slip)	Initials & surname	R	Job description	ID Number
Total		R		

## **SECTION 3: STATE <u>YOUR</u>** (Student) MONTHLY LIVING COSTS:

(Please indicate if you are moving to res)

Rent	Water/Electricity	Books	
Food	Transport	Other	
		TOTAL	R

# SECTION 4: LIST OF ALL FAMILY MEMBERS DEPENDANT ON FAMILYINCOME AND LIVING IN YOUR HOME. START WITH YOUR NAME:

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

## **SECTION5: STUDENT LOANS/ FINANCIAL AID**

nk/Person/Institution	Year	Value	Current Balance	
	Total			

Name	Year	Value	Awarded
			Yes/No
		Total	

SECTION 7: 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 and to the best of my knowledge the details given are complete and correct.	application
I understand that should any information be omitted or found to be incorrect and misleading the Committee, disc	iplinary 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)	

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

(In signature required if submitted via email)

		Please tick
	DOCUMENTATION	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 nettsalary.	
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 THISAPPLICATION FORM.

### INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

For help of further information contact the Financial Aid Administrator on telephone 046-6038248 or email <a href="mailto:finaid@ru.ac.za">finaid@ru.ac.za</a>. Alternatively the Alumni Relations Office, Alumni House 046 603 8887 or email <a href="mailto:alumni@ru.ac.za">alumni@ru.ac.za</a>.