

APPLICATION FOR FUNDING Student Top-Up Finance

PERSONAL INFORMATION								
Name and Surname:								
Gender:		ID:						
Date of birth:		Tel no:		Cell no:				
Email:								
Physical address:								
				ı	Postal Code:			
	EDUCA	ATIONAL INFO	RMATION					
What is the highest academic Grade you have achieved?		What i	What is your Grade aver					
What course are you applying for?	•							
What is the duration of the course	??							
Academic Year you are applying for	or:							
How often will your progress be as	ssessed by the insti	tution?						
Institution:								
	FUNDIN	G APPLICATIO	N DETAILS:					
Total amount requested (up to a r	max value of R20 0	00):						
What is the funding needed for? T	uition Fees Liv	ving Costs Tra	Insportation Costs	Educ	cational Material			
By when are the funds needed?								
Name other funding institutions yo	ou applied at:							
Where?								
Successful?	YES		NO					
If the answer is yes, please state	what is the amount	you have been g	granted:		-			
Have you applied to FRANCO befo	ore?							
*NB Please attach the Co	-	-			=			

*NB Please attach the Course Fee, Bursary amount received (if applicable), Matric results/latest results, proof of acceptance letter/or any letter to proof your college application, ID copy and a motivation letter to support your application.

WORK INFORMATION (IF CANDIDATE IS EMPLOYED):								
Employer name:								
Position:				Starting date:				
Remuneration:								
Contact number of employer:								
REFERENCES (2)								
Name:		Address:			Contact number:			
Name:		Address:			Contact number:			
SIGNATURES								
I declare that I have read and understood the contents of this application form, and information supplied by me is true and correct. I also understand that should any of the information/documents attached herein be proved to be incorrect or falsified, disciplinary action will be taken against me. I also undertake to supply additional information if required by FRANCO. I also indicate my willingness to abide by the rules, regulations and instructions issued by FRANCO in respect of any funding awarded and agree to subject myself to any monitoring and evaluation initiative required by FRANCO. The Parties acknowledge their respective obligations to comply with the substantive provisions of the Protection of Personal Information Act, 4 of 2013 (herein after referred to as ' POPI '). Where any party receives any personal information as defined in POPI it shall ensure that it fully complies with the provisions of the Act and only deal with the personal information to fulfil its obligations								
I also understand that completion and submission of this form does not commit FRANCO to approving this application and subsequent funding.								
Signature of appli	licant:			Date:				
	gnature of parent/guardian: f student is under 18)			Date:				
FOR OFFICE USE ONLY Date received: Date approved: Application no:								
Application appro	ved	Amount:						
Application rejector	ed Reason for rejection:							