EPHRAIM MOGALE LOCAL MUNICIPALITY



BURSARY SCHEME FOR UNDERGRADUATE STUDIES **ACADEMIC YEAR 2016**

Ephraim Mogale Local Municipality is offering a number of bursaries to deserving students residing within Ephraim Mogale Local municipality jurisdictional area to study at a registered and recognized tertiary institution.

Bursaries will only be granted to full-time students registered in the following fields of study:

- Finance (Commerce) •
- Agriculture +*+
- **Tourism**
- Engineering (Civil, Electrical and Mechanical)
- Records Management
- Information Communication Technology
- **Town Planning**

Application forms are obtainable from the offices of the Ephraim Mogale Local Municipality and the Satelite offices (Leeuwfontein, Elandskraal and Zamenkomst). Completed application forms should be accompanied by the following valid documents:

- Grade 12 Certificate or Statement of results,
- Certified copies of salary advice/s of parent/s or guardian/s, +++
- Certified copy of the Identity Document of the applicant and of the • parent or guardian,

Motivation letter for financial assistance and for the chosen field of

Enquiries should be directed to M.T. Mothogwane at (013) 261 8400 / 8408 during office hours. Applications should be submitted to the office of the Municipal Manager, Ephraim Mogale Local Municipality, P O Box 111, MARBLE HALL, 0450. Faxed and e-mailed applications will not be accepted.

Fraudulent documentation will immediately disqualify any applicant: A candidate who canvasses any Employee or Councilor for preference will immediately be disqualified from the selection process.

Closing date: 18 December 2015 at 16:30. Should you not have been contacted within 30 days after the closing date you may assume that your

application was unsuccessful. Ephraim Mogale Local Municipality subscribes to the principles of Equal Opportunities and Affirmative Action.

Mathebela M.M. Municipal Manager

BURSARY POLICY FOR MEMBERS OF THE COMMUNITY: 2015/2016



EPHRAIM MOGALE LOCAL MUNICIPALITY BURSARY FORM FOR 2016 ACADEMIC YEAR

| Financial position of Parents/Guardian | | Academic Results | | | |
|--|-------|------------------|----------------|----|-------------------|
| | | Matriculants | | | Tertiary Students |
| Annual Income | Fours | Symbol % | vmbol % Points | | |
| | | - | SG | HG | |
| | | 0 (000/ 1) | 60 | 80 | 80% + 90= Points |
| ess than R20 000-00 | 50 | A (80% +) | | 70 | 70% - 79% Points |
| R20 000-00 – R30 000-00 | 45 | B (70% - 79%) | 50 | | 60% - 69% Point |
| | 40 | C (60% - 69%) | 40 | 60 | |
| R30 000-00 - R40 000-00 | 35 | D (50% - 59%) | 30 | 50 | 50% - 59% Point |
| R40 000-00 R40 000-00 | | E (40% - 49%) | 20 | 40 | |
| R50 000-00 - R60 000-00 | 30 | E (40% - 40%) | | | _ |
| R60 000-00 - R70 000-00 | 25 | | | | |
| R70 000-00 - R80 000-00 | 20 | | | | |
| R80 000-00 - R90 000-00 | 15 | | | | |
| R90 000-00 - R100 000-00 | 10 | | | | |
| R100 000-00 - R120 000-00 | 5 | | | | |
| More than R120 000-00 | 0 | | | | |

Proof of enrolment/Acceptance at an educational institution = 10 Points

APPLICATION FOR COMMUNITY BURSARY



| E | 3 | | | |
|----|--|-------------|-------------------|--|
| Α. | Personal Details | | | |
| | Surname: | | | |
| | First Names: | | | |
| | Identity Number: | | | |
| | Postal Address: | | | |
| | Residential Address: | | a the said and to | and the state of the second se |
| | Telephone: (Home) | | | |
| | Cellular Phone: | | | |
| в. | Academic History Sch | ooling | | |
| | Highest Standard Pas | sed: | | |
| | Year Completed: | - | | |
| | المميان بين | | | 1.1. |
| | Name of the school. Subjects passed in th | e highest s | tandard and sy | mpois: |
| | Ounjour ! | | b. | Symbols: |
| | Subjects: | | | |
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| | BERS OF THE COMMUNITY: 2015/2016 |
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| BURSARY POLICY FOR INCH. | |

C.

| Study Plan | | | | |
|--|--|--|--|--|
| Proposed Qualification: | | | | |
| Name of Institution: | | | | |
| Duration of the course: | | | | |
| Subject/Modules of the course: | | | | |
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| | | | | |
| Please attach the course details from the institution. | | | | |
| Parent/Guardian | | | | |
| Name of Parents/Guardian | | | | |
| Name of the Employer | | | | |
| Annual Salary | | | | |

Please submit a salary advice of not older than three months.

BURSARY POLICY FOR MEMBERS OF THE COMMUNITY: 2015/2016

| the bursar is less than 21 years of am fully acquainted with and accept | age) the undersigned, the terms and condition | (Guardian in the case hereby acknowledge that I n of the Municipal Bursary |
|--|--|--|
| Policy. I hereby irrevocably authorize you to without prior arrangements with the Management to recover all amounts owed by me to | nat on changing or disc | continuing with my studies bide by the rules of the fund |
| BURSAR/Guardian 1. Witness | 2. | DATE |
| Approved/ Not Approved MUNICIPAL MANAGER 1. Witness | 2. | DATE |

ACKNOWLEDGMENT OF DEBT FORM

| | ſ. | the undersigned, (Guardian in |
|----|---|----------------------------------|
| | the case the bursar is less than 21 years of age) dindebted to Ephraim Mogale Local Municipality for the arising from the bursary offered for my studies in terms | of Community Bursary Policy. |
| | The terms under which bursary has been granted to me Bursary Policy of Ephraim Mogale Local Municipality. | e are contained in the Community |
| | | ON THE DAY |
| | THIS DONE AND SIGNED AT IN THE PRESE | NCE OF THE UNDERSIGNED |
| | WITNESSES: | yc. |
| a) | BURSAR /GUARDIAN | |
| | AS WITNESSES: | |
| | 1. Name and Surname | Signature |
| | 2. Name and Surname | Signature |

CERTIFICATE OF ENDORSEMENT

Agreement between the Municipality and Employee Organisation/Labour Forum. We, the signatories to this agreement, duly authorized thereto, hereby commit ourselves to the content of this Policy.

The Agreement to this Policy shall come into effect on the date of endorsement by all parties and shall cease only in the event where such changes/variations has been reduced to writing and been signed by all parties concerned. Unless in the event where any changes in any applicable Act, Legislation or Bargaining Council Main Agreement has jurisdiction to supercede.

| | a Maniainality |
|-----------------------------------|-----------------------------|
| For and on behalf of Municipality | As witness for Municipality |
| <u>.</u> | |
| Date | Date |
| | et 2 2 |
| For and on behalf of Samwu | As witness for Union |
| Date | Date |
| cex D | |
| For and on behalf of Imatu | As witness for Union |
| A | Doto |
| Date | Date |