

Working together for a skilled tomorrow

FOR BURSARIES FOR ACADEMICALLY
PROMISING LEARNERS FOR 2019
ACADEMIC YEAR

NAME OF TVET COLLEGE:	
------------------------------	--

CONTACT DETAILS	Full Name & Designation	Contact Number	Email address
Programme Coordinator	Name:		
	Designation:		
Official authorized representative who will sign the funding contract			

APPLICATION INFORMATION				
Qualification Name	NQF Level	Level of study in 2019 i.e. N4, N5 etc	Total number of learners per level of study	Total cost per learner

INSETA

It is an offence in terms of the Skills Development Act of 1998 to provide false or misleading information in this Application.

Your application will be rejected should false or misleading information be found.

INSETA reserves the right to verify the documented responses.

I _____ (Full Names), in my capacity as

_____ declare that the information provided is correct and according to my knowledge, I have authority to bind the TVET College accordingly. Furthermore, I have satisfied myself to the extent, nature and regulations governing the proposed Programme from the INSETA Discretionary Grant Policy and related Guidelines.

Authorized Signatory: _____

Date: _____

Signature: _____

For more information or queries in this regard may be emailed to bursariesforyouth@inseta.org.za or contact **Ms. Zibuyile Nkabinde** on **011 381 8900/ 8935**.