## **Bursary application – 2017**

## 1. GENERAL

Please complete the questionnaire in your own handwriting and provide as much detail as possible. All information provided will remain strictly confidential. Please do not include any original documents in support of your application as documentation will not be returned to you.

Please return this application before 12 October 2016 to:

Advisor: Training and Employee Support

Rössing Uranium Limited Private Bag 5005 Swakopmund

Fax: (+ 264 64) 520 2625

e-mail: Bursariesnam@riotinto.com

Bursaries for 2017 are being offered in the following field of study *only*:

- Civil engineering
- Engineering geology
- Mechanical engineering

## 2. PERSONAL INFORMATION

Title	Mr	Miss	Sur	name						
First N	ames									
R	ermanei esidenti Address	al								
Pos	stal Addı	ess								
Pa	arents/L conta	egal Gu ct numb	ardian er	Mot	her:				Fat	ther:
Teleph	none Ho	me:	ode:	No:				Schoo	ol:	Code: No:
Cell P	hone					E-ma	il Add	ress		
Age		Da	ite of Bii	th				Place (to	of owr	
Nation	ality			Citize	nship					I.D. No

## 3. SCHOOL ACADEMIC RECORD

Please provide the names of the schools that you have attended.

Name of School	Town or		riod (Y	ears)		ndard	Language of
Hame of School	District	Froi	m	То	Pa	ssed	Instruction
/hich grade(s) did you repe	eat?						
Leadership Roles:							
i.e. prefect, class captain							
·							
ere you a member of the L	.RC or SRC? Yes	s No		Whe	n:		
RADE 12 SUBJECTS TAKE	EN AND RESULTS	*					
TIADE 12 GODDEGTO TARE	EN AND HEGGETS						RADE 12
SUB	JECTS		In	dicate L	evel		EXAMINATION
			HIGS	CE.	IGSCE	First	
			піца	OCE	IGSCE	Attem	pi nepeatet
Please attach a certified co	opv of vour latest (	August)	official	l examii	nation re	sults.	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>3</b> ,					
. HEALTH							
o you suffer, or have you in	the poet outfored fro	m ony of	the fell	owina n	andinal an	nditiona	
	ine pasi sunered iro	on any or			iedicai co	mailions.	
EART	YES NO		EPI	LEPSY			YES NO
UNG DISEASE OR ASTHM	A YES NO		BAC	CK			YES NO
NY ALLERGIES	YES NO		HIG	H BLO	DD PRES	SURE	YES NO
ave you ever had any seriou	s illness or operatio	n? If so,	give de	etails an	d dates:		
	•	ŕ	-				

Course		Current Academic Year			
Subject	Result	Subject	Result		
			L		
6. LEISURE TIME ACTIVITI	<u>E5</u>				
/hat are your main hobbies?					
o which societies or clubs do/d	id you belong? Give deta	ils if you serve or have served o	n any committ		
7. FIELD OF STUDY					
	ıdy				
Please indicate intended field of stu	udy				
Please indicate intended field of stu Choice No. 1:	udy				
Please indicate intended field of stu	udy				
Please indicate intended field of stu	udy				
Please indicate intended field of stu	udy				
Please indicate intended field of stu Choice No. 1: Reason:		v balow:			
Please indicate intended field of stu  Choice No. 1:  Reason:  Year you are a grade 12 applicant, ind		y below:			
Please indicate intended field of stu Choice No. 1: Pleason:		y below:			

PLEASE RETURN THE COMPLETED APPLICATION FORM BY 12 OCTOBER 2016

Signature:	Date:
A TT A OLUBA	
ATTACHM	ENTS:
	Certified copies of Gr. 12 certificate, if applicant completed Gr. 12 prior to 2016.
	Certified copies of academic results (2015 year end and 2016 August results)
	Certified copies of latest tertiary results, if applicant is currently studying at a tertiary institution.
	Copies of provisional/admission letters where available
	Certified Copy of Namibian ID, Passport or birth certificate
	Medical Aid/Insurance Cover