

## **Bursary application – 2019**

## 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 28 September 2018 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 2019 are being offered in the following field of study *only*:

Preference will be given to 3<sup>rd</sup>, 4<sup>th</sup> year and post-graduate students already studying in the following fields:

- Electrical engineering
- Engineering geology (Geotechnical)

## 2. PERSONAL INFORMATION

Title	Mr	Miss	S	Surnam	е										
First names															
Permanent residential address															
Postal	address	3													
Parents/legal guardian number			Mother:				Father:								
Teleph	none ho	me:	ode:		No:					Schoo	ol:	Code:		No:	
Cell p	hone				E-ma	E-mail address									
Age		Da	te of birth					Place of birth (town)			(town)				
Nation	ality			C	Citizens	hip						ID no			

HEART	YES	NO	EPILEPSY	YES	NO
UNG DISEASE OR ASTHMA	YES	NO	BACKACHE	YES	NO
NY ALLERGIES	YES	NO	HIGH BLOOD PRESSUR	RE YES	NO
lave you ever had any serious il	Iness or op	peration? If so	, give details and dates:		
Vhat is your present state of hea	alth:				
4. ACADEMIC RECORD					
	institute,	please indica	te latest results:		
f you are currently at a tertiary  Name of institution	institute,	please indica			
Name of institution	institute,	please indica	Current academ	ic year	
lame of institution	v institute,	Please indica		ic year	Result
lame of institution	r institute,		Current academ	ic year	Result
lame of institution	v institute,		Current academ	ic year	Result
Name of institution Course	v institute,		Current academ	ic year	Result
Subject  5. LEISURE TIME ACTIVI			Current academ	ic year	Result
Name of institution Course Subject			Current academ	ic year	Result

PLEASE RETURN THE COMPLETED APPLICATION FORM BY 28 SEPTEMBER 2018

	understand that, in the event of my being awarded a bursary; any invalid. I further declare that I do not receive any other funding for nediately inform Rössing Uranium.
Signature:	Date:
ATTACHMENTS:	
Certified copies of tertiary academic res	ults (2017 year-end and 2018 August results)
Proof of registration at a recognised inst	iitution
Certified copy of Namibian ID, passport	or birth certificate
Medical Aid/Insurance Cover	
Note: Only short lis	sted candidates will be contacted.