

National Agricultural
Marketing Council
Promotine market access for South African agriculture

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http://www.namc.co.za

INTERNAL BURSARY APPLICATION FORM

Please complete the Form & mark appropriate blocks with an "X" **Email completed Bursary** where necessary, Failure to complete this application form fully application form and correctly may prejudice the applicant's chances of obtaining hr@namc.co.za a bursary. **CLOSING DATE: 10 SEPTEMBER 2021** FOR 2022 STUDIES 1. PERSONAL PARTICULARS _____Tittle Surname:_____ First Names: Identity Date of Birth: Number:_____ Postal Address: Physical Address: Telephone Number: Cell Number: Alternative Number: _____ E-mail address: Race: Black /Coloured/Indian/ White Disability: Yes No DIVISION Gender:

Have you previously received a Burs	sary from NAMC? YES/NO	
If yes – until which year, and kindly	·	
Were you previously a recipient of a	nother bursary from other o	rganisation? YES/NO
If the answer is yes please indicate the obligations have been fulfilled		
3. INSTITUTION THE BURSAF	RY APPLIED STUDIED TO	
Name of the accredited tertiary instit	tution of which you intend to	studying
Name of the Qualification which you	ı are applying for	
Number of years you intend studying	g for	
Indicate the Major Courses of the Al	bove Mentioned Qualificatio	n.
4. HIGHEST QUALIFICATION	S	
Name of Institutions	Degree/Diploma	Year Completed
eclare that the above particulars are t omplete information may constitute o		
Signature of Applicant		Date