



**LEGAL  
PRACTITIONERS  
FIDELITY FUND**

SOUTH AFRICA

Your Ref:

Our Ref Shawn/Further Study Bursary App

Dear Student

**BURSARY APPLICATION FOR FURTHER STUDY AT A LOCAL UNIVERSITY**

Enclosed please find a \*bursary application form for study at a local university, together with the rules relating thereto valid for the 2020/2021 academic year only.

You must complete all the questions in the form and attach all relevant documents where requested to. If you leave any questions blank, we may send the incomplete form back to you and it will not be submitted to the Bursary Committee until all the necessary information is provided.

The closing date for applications, are to reach our offices by no later than 15 August 2019. You may post or hand deliver your application form.

We do not accept faxed or e-mailed application forms.

Yours faithfully

MR. AFRICA

BURSARY CO-ORDINATOR

**Cape Town Office**

**Tel** +27 (0) 21 424 5351 **Fax** +27 (0) 86 549 2050

**Email** attorneys@fidfund.co.za **Website** www.fidfund.co.za

**Physical** 5th Floor, Waalburg Building, 28 Wale Street, Cape Town, 8001, South Africa

**Postal** P O Box 3062, Cape Town, 8000, South Africa, Docex 154, Cape Town

**Centurion Office**

**Tel** +27 (0) 12 622 3900 **Fax** +27 (0) 86 604 8452

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**Postal P O Box** 12189 Die Hoewes, 0163 Docex 24 Centurion



# LEGAL PRACTITIONERS FIDELITY FUND

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## APPLICATION FOR A BURSARY TO STUDY FOR FURTHER STUDIES IN LAW

|   |  |
|---|--|
| <b>BURSARY NO.:</b><br><i>(For official use only)</i> |  |
|---|--|

|   |   |
|---|---|
| <p><b>PLEASE NOTE:</b></p> <ol style="list-style-type: none"> <li>1. COMPLETE FORM IN TYPED OR PRINTED WRITING</li> <li>2. IT IS TO YOUR BENEFIT THAT THIS FORM BE COMPLETED AS COMPREHENSIVELY AS POSSIBLE</li> <li>3. NOTE THE REQUIRED ANNEXURES (SECTIONS "B", "D" &amp; "G")</li> <li>4. ATTACH A CERTIFIED COPY OF YOUR IDENTITY DOCUMENT OR PROOF OF PERMANENT RESIDENCY STATUS</li> </ol> | <p><b>ATTACH<br/>PASSPORT SIZE<br/>PHOTOGRAPH</b></p> |
|---|---|

| SECTION 'A' – PERSONAL PARTICULARS                  |  |
|---|--|
| SURNAME   |  |
| FULL FIRST NAMES                                    |  |
| GENDER<br><i>(Male or Female)</i>                   |  |
| RACE<br><i>(Black, Coloured, Indian, White)</i>     |  |
| DATE OF BIRTH                                       |  |
| IDENTITY NUMBER<br><i>(Attach A Certified Copy)</i> |  |
| CITIZENSHIP   | <i>(If You Are Not A S.A. Citizen, Please Attach A Certified Copy of Your Permanent Residence in S.A.)</i> |
| MARITAL STATUS                                      |  |
| DEPENDENT CHILDREN<br><i>(State Ages)</i>           |  |
| BUSINESS ADDRESS                                    |  |
|   | Postal code:   |
| BUSINESS TEL. NUMBER                                |  |



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|   |              |
|---|--------------|
| RESIDENTIAL ADDRESS   |              |
|   | Postal code: |
| HOME TEL. NUMBER  |              |
| CELLPHONE NUMBER  |              |
| E-MAIL ADDRESS  |              |
| POSTAL ADDRESS<br><i>(Address where correspondence must be sent to)</i> |              |
|   | Postal code: |

| SECTION 'B' – ACADEMIC QUALIFICATIONS                                       |            |               |
|---|------------|---------------|
| <b>1. DEGREES OR DIPLOMAS OBTAINED</b>                                      |            |               |
| DEGREE/DIPLOMAS   | UNIVERSITY | DATE OF AWARD |
| 1.1   |            |               |
| 1.2   |            |               |
| 1.3   |            |               |
| 1.4   |            |               |
| 1.5   |            |               |
| <i>Please attach academic transcripts for all, if any, degrees/diplomas</i> |            |               |
| SECTION 'C' – PROFESSIONAL PARTICULARS                                      |            |               |
| 1. HAVE YOU BEEN ADMITTED AS AN ATTORNEY                                    | YES        | NO            |
| 2. WHEN WERE YOU ADMITTED AS AN ATTORNEY                                    |            |               |
| 3. ARE YOU PRACTICING AS AN ATTORNEY AS PRESENT                             | YES        | NO            |
| 4. PRESENT POSITION   |            |               |
| 5. NAME OF EMPLOYER/FIRM  |            |               |
| 6. ADDRESS OF EMPLOYER/FIRM   |            |               |
| SECTION 'D' – PROPOSED COURSE OF STUDY                                      |            |               |
| 1. At which university or institution do you propose to study               |            |               |
| 2. Please provide us with your  |            |               |



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|  |                          |                          |
|--|--------------------------|--------------------------|
| student number for the above university or institution   |                          |                          |
| 3. Please indicate, as precisely as possible, the period during which you will undertake your studies  | FROM<br>____/____/20____ | FROM<br>____/____/20____ |
| 4. Degree or diploma to be obtained by the intended study or research  |                          |                          |
| 4.1 Are you applying for a LL.D, PHD or MPIL bursary?<br><b>If so, please provide a letter of acceptance from the university</b>   |                          |                          |
| 5. Indicate at least 4 courses/modules of which you intend registering   |                          |                          |
| 5.1  |                          |                          |
| 5.2  |                          |                          |
| 5.3  |                          |                          |
| 5.4  |                          |                          |
| 6. Explain the relevancy of your course of study to the practice of law as an attorney   |                          |                          |
|  |                          |                          |
|  |                          |                          |
|  |                          |                          |
| 7. Motivate your application in a few words:   |                          |                          |
|  |                          |                          |
|  |                          |                          |
|  |                          |                          |
| <b>SECTION E : GRANT APPLIED FOR</b>   |                          |                          |
| 1. Amount applied for:   | R                        |                          |
| 2. Purpose for which grant is required :<br>Please indicate the amount you require in respect of the following items of expenditure. It is not essential that an amount be allocated to each item. |                          |                          |
| Fees   | R                        |                          |
| Books  | R                        |                          |
| Other  | R                        |                          |
|  | R                        |                          |
|  | R                        |                          |
| TOTAL  | R                        |                          |
| <b>SECTION 'F' – GENERAL</b>   |                          |                          |
| 1. Did you obtain leave from your employer for the proposed period of study  | Yes                      | No                       |
| 2. If leave was obtained, will it be paid or unpaid leave  | Paid                     | Unpaid                   |
| 3. If you have been awarded other financial assistance, please indicate the name of grantor and the amount awarded.  |                          |                          |
| 3.1  | R                        |                          |
| 3.2  | R                        |                          |
| 3.3  | R                        |                          |



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Have you applied for NSFAS funding? If not, why not? Please state reason below:

4. If you have applied for other assistance and are still awaiting the outcome, please indicate to whom you have applied and the amount for which you have applied.

|     |   |
|-----|---|
| 4.1 | R |
| 4.2 | R |
| 4.3 | R |

5. REFERENCES: ATTACH at least ONE RECENT TESTIMONIAL BY THE DEAN of your Faculty of Law (or his assignee). The testimonial must, IN ALL INSTANCES, refer to your academic record and, in case of applications based on serious financial need, testify as to your ability to complete the LL.B degree within the prescribed period.

## SECTION 'G' – FINANCIAL DETAILS

|  |          |
|--|----------|
| 1. APPLICANT'S PARENTS (Assets & Liabilities)                                    |          |
| 1.1 ASSETS   |          |
| 1.1.1 Fixed property (market value)  | R        |
| 1.1.2 Motor vehicles   | R        |
| 1.1.3 Savings/investments  | R        |
| 1.1.4 OTHER (Specify)  | R        |
| <b>Total Assets</b>  | <b>R</b> |
| 1.2 LIABILITIES  |          |
| 1.2.1 Bond over fixed property   | R        |
| 1.2.2 Balance owing on vehicle(s)  | R        |
| 1.2.3 Overdraft  | R        |
| 1.2.4 Amount owing on credit card  | R        |
| 1.2.5 OTHER (Specify)  | R        |
| <b>Total Liabilities</b>   | <b>R</b> |
| 2. APPLICANT (Income and expenditure)  |          |
| 2.1 INCOME (per year)  |          |
| 2.1.1 Salary during study period   | R        |
| 2.1.2 Other financial assistance (Section 'F.3' above)                           | R        |
| 2.1.3 Assistance from parents  | R        |
| 2.1.4 OTHER (Specify)  | R        |
| <b>Total Income</b>  | <b>R</b> |
| 2.2 EXPEDITURE (total of Section 'E')  | R        |
| 3. Do you possess a motor vehicle or other loose assets? Please provide details: |          |

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_



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| <b>SUMMARY FOR OFFICE USE ONLY</b> |  |
|------------------------------------|--|
| 1. Name                            |  |
| 2. Occupation                      |  |
| 3. Proposed study/research         |  |
| 4. Subject of study                |  |
| 5. University/institution          |  |
| 6. Period of study/research        |  |



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## CHECKLIST

- 1 Have you attached your passport size photograph to the application form?
- 2 Are you a South African Citizen?
- 3 If not, have you attached a certified copy of your permanent residence in South Africa?
- 4 Have you attached a certified copy of your identity document?
- 5 Have you attached your official transcript of your academic record, until the end of the first semester of this year?
- 6 Have you attached a recent testimonial by the Dean of your Faculty of Law or his assignee?
- 7 Have you signed and dated your application?
- 8 Is this the original application form?
- 9 We do not accept faxed or e-mailed application forms, please post or hand deliver your original application form.

**IF YOU DO NOT ATTACH THE ITEMS LISTED ABOVE, YOUR APPLICATION FORM WILL BE INCOMPLETE.**

**THE INCOMPLETE FORM WILL BE RETURNED TO YOU AND IT WILL NOT BE SUBMITTED TO THE BURSARY COMMITTEE UNTIL ALL THE NECESSARY INFORMATION IS PROVIDED.**

Kindly direct all queries to:

Shawn Africa on 021 - 424 4608 or e-mail to: [shawn@fidfund.co.za](mailto:shawn@fidfund.co.za)