

SANA South African Nursery Association Suid-Afrikaanse Kwekersvereniging

P O Box 514, Halfway House, 1685

Telephone: 072 994 5368 Mobile: 082 780 7628

Fax: 086 718 7268 E-mail: info@sana.co.za

Nonprofit Organisation Registration number: 031-316-NPO

VAT No: 4240116287

CHECK LIST

Thank you for applying for a Bursary from SANA. Before you start please be reminded that there are prerequisites to ensure that you are considered. Be aware of the following points and the checklist below will assist you in making sure you have covered all the prerequisites.

- 1. The Bursary does not cover outstanding fees and the Bursary is only valid for the current academic year study.
- 2. The SANA Tom Arnold Bursary Fund does not cover Registration Fees. All students will have to ensure they are fully registered with the institution before the bursary can be awarded.
- 3. In order to qualify for consideration, Horticulture Students must have an average of at least 60% per subject and have passed at least 3 subjects.
- 4. Students studying in the Landscaping or Agriculture fields can apply for consideration also. These Students need to have completed their first year of study with an average of 60% or higher per subject.
- 5. All applicants are required to write a motivation letter of no less than 150 words in support of their application, to be considered.
- 6. Please note that applications by PhD, Masters and BTech students will be reviewed on a case-by-case basis.

Incomplete applications will not be considered.

Please complete the following before emailing

| 1. | Horticulture Students, have you passed at least three subjects? Agriculture and Landscaping, have you passed your first year of study and at least three subjects? Please list all subjects passed as well as the % achieved for each subject: | |
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| 2. | Have you completed all the questions on your bursary application? | |
| 3. | Did you remember to note the cost of each subject? | |
| 4. | Did you attach an application form for your SANA student membership? | |
| 5. | Did you attach a copy of your ID? | |
| 6. | Did you attach a copy of your academic record? | |
| 7. | Did you attach your October/November results? | |
| 8. | Did you attach a copy of the institution's banking details? | |
| 9. | Did you attach a copy of your new academic year 2019 registration form? (Only students who have registered for the academic year 2019 will be considered for a bursary) | |

APPLICATION FOR STUDENT MEMBERSHIP 2020

| udent Name: | | | | | |
|--|--|--------------------------------|-----------|---------------|-----|
| me of Institution registered at: | | | | | |
| urse of study: | | | | | |
| nich yr.: 1 st , 2 nd , 3 rd , 4 th | | | | | |
| maining Subjects to qualify | | | | | |
| bjects Currently registered for? | | | | | |
| e you temporary employed, if so where? | | | | | |
| e you permanently employed, if so where? | | | | | |
| stal Address: | | | | | |
| ysical Address: | | | | | |
| l: | 1 | Fax: | | | |
| II: | ı | Email: | | | |
| xt of kin: | (| Cell: | | Relationship | |
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| | UTION MAY | | · e | | |
| MEN | <u>IBERSHIP B</u> | BENEFII | <u>5</u> | | |
| Membership is free of charge. Regular communication to me matters relating to our Industry. Receive a bi-annual copy of the Be invited as a visitor to the rate (twice a year) and KZN, where industry operates. | /, important date le SANA Magazi lpidly growing SA | s and more ne. \NA TRADI | E FAIRS h | neld in Gaute | ng |
| Signed at | this | _ day of _ | | 20 | 20. |

Signature:_____



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APPLICATION FOR BURSARY 2020

In order to qualify for consideration, Horticulture students must have successfully completed and passed 3 subjects and have an average of over 60%. We do not provide bursaries for the practical training required for the qualification.

Students studying in the Landscaping or Agriculture fields can apply for consideration. Students need to have completed their first year of study with an average of 60% or higher per subject.

A motivation of no less than 150 word needs to accompany all applications to be considered for a bursary.

All applicants must have completed and passed 3 first academic year subjects before their applications will be considered. All applicants may be contacted for an interview with a SANA representative in their region.

A copy of your ID must be submitted along with your application. If additional supporting documents and ID are not attached, or the application form is not completed correctly, the application will be rejected.

Closing date for consideration will be 07 February 2020 for interviews the following March 2020. **NB:** Incomplete applications will not be considered.

Bursary Applications can be submitted via email to bransby@sana.co.za or by Fax 086 7187268:

| 1. | Surname: | | | | | | | | |
|----|-----------------|------|------|------|------|------|------|------|--|
| 2. | Name: | | | | | | | | |
| 3. | Date of Birth: | | | | | | | | |
| 4. | Citizenship: | | | | | | | | |
| | ID No: | | | | | | | | |
| | Student No: | | | | | | | | |
| | Institution: | | | | | | | | |
| | Region: | | | | | | | | |
| 5. | Marital Status: | | | | | | | | |

| 6. | Number of children and other dependents: | | | | | | | |
|-----|---|--|--|--|--|--|--|--|
| 7. | Residential Address: | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 8. | Contact Details | | | | | | | |
| | Cell Phone number: | | | | | | | |
| | Work Telephone: | | | | | | | |
| | Alternative contact: | | | | | | | |
| | E-mail Address: | | | | | | | |
| 9. | Current Working Status (please tick applicable block) | | | | | | | |
| | Working Unemployed Full time student | | | | | | | |
| | If working, please give details of employment: | | | | | | | |
| | | | | | | | | |
| 10. | Work experience including number of years. Have you had any previous experience working in a nursery or landscaping? Where, when and for what period of time? | | | | | | | |
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| 11. | Community projects: Have you participated in any community projects, if yes please give details of where and when: | | | | | | | |
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| | | | | | | | | |
| 12. | Name of Qualification: | | | | | | | |
| | NB: First Year of Registration: | | | | | | | |
| | | | | | | | | |
| 13. | Year of Current Studies: | | | | | | | |
| 14. | Where do you live and are you studying in the same place? If not, which town are you studying in? | | | | | | | |
| 15. | STUDENT'S ACADEMIC RECORD Please attached a copy of your academic record for each year passed – compulsory | | | | | | | |

| Amount: R | vith Institution ☐ YES | □ NO |
|--------------------------|---|-------------------------------------|
| Subjects to register for | or the NEW Academic year: | |
| Subject | Subject Code | Cost |
| | | |
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| | of horticulture/landscaping you interpolation, landscaping etc. | end to pursue once qualified and wh |
| | | end to pursue once qualified and wh |
| | r, landscaping etc. | end to pursue once qualified and wh |
| ie: grower, retaile | r, landscaping etc. | end to pursue once qualified and wh |

| 22. | PLEASE GO THROUGH THE CHECK LIST COMPLETE, IF NOT TICKED, THE APPLIC CONSIDERATION | |
|------------|--|------------------------------|
| , | ull name and surname)tained in the application is correct and true. | certify that the information |
| Applic | ant | Date |

22.