

APPLICATION FORM

SELECTION PROCESS AND CRITERIA FOR FEM EDUCATION FOUNDATION SCHOLARSHIP IN PARTNERSHIP WITH MAKE A DIFFERENCE LEADERSHIP FOUNDATION

PROCESS:

- The completed application form, **along with relevant supporting documentation**, is to be submitted by fax or email by no later than **15 July 2017**;
- Candidates who meet the selection criteria will receive an invitation to participate in various psychometric and leadership assessments (31 July to 31 August 2017);
- Candidates identified through these assessments will attend a final interview (18 to 25 September 2017).;
- If an applicant has not received an invitation by 31 August 2017, then it should be assumed that the application was not successful;
- Successful candidates will be notified of their acceptance to the 2018 Make A Difference Leadership Foundation Scholarship Programme by 6 October 2017;
- Any application submitted that is incomplete or incorrectly completed will unfortunately not be considered and will be immediately eliminated as a potential applicant;
- Any application that does not meet the basic requirements will not be considered, this is non-negotiable;
- The final date for submissions is 15 July 2017 – **no late applications will be accepted under any circumstances.**

REQUIRED SELECTION CRITERIA:

- Current Grade 7 to Grade 12 learner;
- Academic performance > 65% aggregate;
- In need of financial support: gross combined income per household per month should not exceed R20 000;
- Must be a South African citizen;
- Speaks and understands basic English;
- Embraces a strong value system and has a sense of responsibility;
- Demonstrates leadership potential;
- Confirmation of good conduct at current academic institution and has no criminal record (or involvement in any criminal activities).



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RECOMMENDED SELECTION CRITERIA

- Participates in extra-curricular activities (school related activities);
- Actively involved in community service;
- One or both parents working in the building industry;
- Applicant who plans to pursue a career in the building industry.

NOTE:

All tuition in arrears prior to your acceptance on this programme will not be the responsibility of MAD Leadership Foundation and must be settled for your own account.

PLEASE COMPLETE ALL SECTIONS, SUPPORTING DOCUMENT CHECKLIST AND TERMS AND CONDITIONS

SECTION 1: Applicant Details

SECTION 2: Parent/Guardian/ Details

SECTION 3: Family Background

SECTION 4: Financial Declaration

SECTION 5: Other Scholarship Information

SECTION 6: To be completed by Parent / Guardian

SECTION 7: To be completed by the applicant

SECTION 8: Leadership Positions

SECTION 9: Questions about yourself

SUPPORTING DOCUMENTS: Checklist

TERMS AND CONDITIONS



SECTION 1: APPLICANT DETAILS

Where did you hear about this scholarship?

Referred by individual Company School Website

Other: _____

First Name(s)

Preferred Name

Surname

Are you a South African citizen?

Yes No

Gender

Male Female

ID Number

Date of Birth

Day Month Year

Race

African Asian Coloured Indian White

Do you have a physical disability?

Yes No Please specify _____



SECTION 1: APPLICANT DETAILS

Home Address

Street Address _____

Suburb _____

City _____

Province

WC NC FS NW GAU

LIM EC KZN MPU

Postal Code

Contact Details

Phone Number

Email Address _____

Home Language

English Afrikaans Zulu Sotho Tswana Tsonga

Venda Swati Ndebele Xhosa

Language of Instruction

English Afrikaans Zulu Sotho Tswana Tsonga

Venda Swati Ndebele Xhosa



SECTION 1: APPLICANT DETAILS

Name of Institution of Study/School

Current _____

Gr.

Next Year _____

Gr. First year at tertiary institution

At which school have you applied and been accepted?

How far are these school from your place of residence?

Would boarding be required? If yes, provide motivation.

Grades in your last exams

Mark in % Subject _____ Mark in % Subject _____

Mark in % Subject _____ Mark in % Subject _____

Mark in % Subject _____ Mark in % Subject _____

Mark in % Subject _____ Mark in % Subject _____

Mark in % Subject _____ Mark in % Subject _____



GRADE 12 APPLICANTS ONLY (OTHER APPLICANTS CONTINUE TO SECTION 2)

Tell us about your plans for next year

Have you received career guidance to help you choose a career?

Yes No

Have you completed an assessment of your abilities, personality and career interests (Psychometric tests)?

Yes No

Do you need further help with career guidance?

Yes No

Have you applied for Tertiary Studies for next year?

Yes No

List the names of the Tertiary Institutions at which you applied

Were you accepted Yes/No

Yes No

Yes No

Yes No

Yes No

List the Courses for which you applied

Were you accepted Yes/No

Yes No

Yes No

Yes No

Yes No

Accommodation

Residence
Own

Residence
Own

Residence
Own

Residence
Own



SECTION 2: PARENT/GUARDIAN/ DETAILS

Please select the relevant box

Father Stepfather Guardian

First Name(s)

Surname

ID Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Marital Status

Married Divorced / Separated Never Married Deceased Widowed

Employed

Yes No Pensioner

Job Details

Employer _____ Job Title _____

Contact Details

Cell Phone Number

Work Phone Number

Email Address _____

Home Address

Street Address _____

Suburb _____

City _____

Province

WC NC FS NW GAU

LIM EC KZN MPU

Postal Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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SECTION 2: PARENT/GUARDIAN/ DETAILS

Please select the relevant box

Mother Stepmother Guardian

First Name(s)

Surname

ID Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Marital Status

Married Divorced / Separated Never Married Deceased Widowed

Employed

Yes No Pensioner

Job Details

Employer _____ Job Title _____

Contact Details

Cell Phone Number

Work Phone Number

Email Address _____

Home Address

Street Address _____

Suburb _____

City _____

Province

WC NC FS NW GAU

LIM EC KZN MPU

Postal Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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SECTION 2: PARENT/GUARDIAN/ DETAILS

Who raised you?

Mother Stepmother Guardian
 Father Stepfather Guardian

First Name(s)

Surname

With whom are you staying and since when?

Mother Stepmother Guardian
 Father Stepfather Guardian

First Name(s)

Surname

Since: _____

**IF YOU ARE SUPPORTED BY SOMEONE WHO IS NOT YOUR PARENT OR LEGAL GUARDIAN,
PLEASE PROVIDE US WITH SOME DETAILS AND THEN ALSO COMPLETE THE SECTION BELOW.**

Tell us about the support provided to you.

Relation

First Name(s)

Surname

ID Number

Marital Status

Married Divorced / Separated Never Married Deceased Widowed



SECTION 2: PARENT/GUARDIAN/ DETAILS

Employed

Yes No Pensioner

Job Details

Employer _____ Job Title _____

Contact Details

Cell Phone Number

Work Phone Number

Email Address _____

Home Address

Street Address _____

Suburb _____

City _____

Province

WC NC FS NW GAU

LIM EC KZN MPU

Postal Code



SECTION 4: FINANCIAL DECLARATION

Please state the combined gross monthly income for your household.

(This is the total of all gross salary earnings, wages, grants, pensions and any other earnings i.e. rent earned, maintenance contribution etc.)

R

Please confirm the financial contributors of your household	Rand Amount per month
Mother's Income	R
Father's Income	R
Guardian's Income	R
Pensions	R
Grants	R
Maintenance	R
Rent Earned	R
Any other sources of income (please specify)	R

SECTION 6: TO BE COMPLETED BY PARENT / GUARDIAN

Please state why your child should be considered for this scholarship



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SECTION 7: TO BE COMPLETED BY THE APPLICANT

Please tell us about the extra-curricular activities you participate in:

(Please attach additional information to this application. Ensure your name is clearly marked on any attached pages.)

A large, empty, light grey rectangular area intended for the applicant to provide details about their extra-curricular activities.



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SECTION 8: LEADERSHIP POSITIONS

Please tell us about any leadership positions you have held. Tell us how you believe you demonstrate leadership qualities.

(Please attach additional information to this application. Ensure your name is clearly marked on any attached pages.)

A large, empty, light gray rectangular area intended for the applicant to provide details about their leadership positions and how they demonstrate leadership qualities.



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SECTION 9: QUESTIONS ABOUT YOURSELF

Please answer the following questions about yourself.

(Please attach additional information to this application. Ensure your name is clearly marked on any attached pages.)

Why do you want this scholarship?

What are your goals and ambitions for your life?

Why do you see yourself as a future leader in South Africa?

How do you see yourself bringing positive change in South Africa?



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SECTION 9: QUESTIONS ABOUT YOURSELF

What have you done to make a difference in your community?

How do you manage group pressure?

What stands out as major achievement for you?

What is your biggest regret?



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SECTION 9: QUESTIONS ABOUT YOURSELF

Tell us about the most difficult challenge you have had to overcome?

Any other details that you think are important to share with us?



SUPPORTING DOCUMENTS: CHECKLIST

(Please ensure that the following relevant and certified documentation is submitted together with your completed application form.)

Please attach certified copies of the following documents:

All the certified copies of income must not be older than 3 months.

Your documents can be certified at the South African Police Service or the South African Post Office.

****If you are under the age of 18 or if you are 18 and older and are still dependent on the household income of your parent or legal guardian, then this also applies to you.***

Document	Compulsory	Check
Certified proof of bank account. <i>This can be a bank statement or a letter from the bank where you have your account.</i>	Yes	
Certified copy of your Identity Document.	Yes	
*Certified copy of Identity Document of each household member including parents or legal guardian.	Yes	
If you are younger than 16 years of age and do not have a green bar-coded ID, you must submit a certified copy of your unabridged birth certificate.	Yes	
If you have been exempted or receive a discount from paying tuition fees (school or tertiary), please provide a letter from the institution informing MAD Leadership Foundation that you have been exempted / receiving a bursary/received a discount.	Yes	
*Certified or official copy of recent payslip / letter of employment (not older than three months) of each of your parents, or the person who supports you, or your guardian. This is for all types of employment. Proof of income of all members of the household must be submitted in the form of a letter confirming the income. This includes any income received from SASSA grants, Unemployment Insurance Fund (UIF), or any retirement, life, disability or other benefits paid as a lump sum or in monthly payments.	Yes	
Proof of residence - such as water and electricity accounts or other accounts.	No	
*If your parents or the person who supports you or your legal guardian is retired, please provide a copy of an official pension slip or bank statement showing pension payment.	Yes	



SUPPORTING DOCUMENTS: CHECKLIST

Document	Compulsory	Check
*If your parents or the person who supports you or your legal guardian works as an informal trader, please provide an affidavit signed by them to confirm this employment.	Yes	
If either of your parents is deceased, please provide a certified copy of the death certificate.	No	
If your parents are divorced or separated, please provide a statement detailing the maintenance order.	Yes	
If your parents are divorced, please provide a certified copy of the divorce decree.	No	
*Certified copy of a SASSA letter if any of your family members are receiving a social grant and are also contributing to your household income. This also applies to your legal guardian.	Yes	
*If a dependant in your household is a student, please provide proof of registration or acceptance at the university or FET college for each dependant.	Yes	
Certified copy of your latest academic transcript or exam results.	Yes	
A letter of confirmation of your good conduct from your academic institution (i.e., principal; teacher; residence head; lecturer etc.) and for schools also confirming the quintile of the school.	Yes	



TERMS AND CONDITIONS

PLEASE NOTE THAT BOTH PARENTS/GUARDIANS NEED TO SIGN THE APPLICATION

PARENTS/GUARDIAN 1:

I _____ guardian/parent of _____ declare that the information provided in this application and attached to this application is true and correct. I hereby acknowledge that if any of the information provided in this application is found to be incomplete and /or incorrect, the application for the MAD Leadership Foundation Scholarship Programme bursary may be disqualified.

I ACCEPT THAT:

- No guarantee can be given that this application for a MAD Leadership Foundation Scholarship will be successful.
- MAD Leadership Foundation reserves the right to withdraw or amend any listed scholarship without prior notification.
- Scholarships are offered subject to funding and availability.
- Scholarships are awarded by MAD Leadership Foundation, and related parties where applicable, and their decision is final. No correspondence will be entered into regarding the reasons for their final decision.
- MAD Leadership Foundation makes use of certain criteria to identify suitable partner schools. Any chosen school is subject to approval according to said criteria.
- If the candidate is successful, participation in scholarship programme will be subject to adherence to signed scholarship agreement.
- Information derived from Psychometric tests done by the MAD Leadership Foundation will stay strictly confidential and the property of the Foundation.

CONFIDENTIALITY

- All information on this form will remain confidential and only persons with a legitimate interest may gain access to its contents.

Signed _____ on _____ of _____ 20_____

Signature: _____

Witness 1: _____ Witness 2: _____



TERMS AND CONDITIONS

PLEASE NOTE THAT BOTH PARENTS/GUARDIANS NEED TO SIGN THE APPLICATION

PARENTS/GUARDIAN 2:

I _____ guardian/parent of _____ declare that the information provided in this application and attached to this application is true and correct. I hereby acknowledge that if any of the information provided in this application is found to be incomplete and /or incorrect, the application for the MAD Leadership Foundation Scholarship Programme bursary may be disqualified.

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Signed _____ on _____ of _____ 20_____

Signature: _____

Witness 1: _____ Witness 2: _____