KWAZULU-NATAL PROVINCE
SPORT, ARTS AND CULTURE
REPUBLIC OF SOUTH AFRICA

SPORT SCHOLARSHIP APPLICATION FORM - 2026 ACADEMIC YEAR

1. PERSONAL PARTICULARS	
Surname:	Title:
First name/s:	
Identity Number:	
Nationality:	
Race: (Circle Answer) **African / Coloured /Indian /White**	
Disability: **YES / NO**	
Date of Birth:	
Gender: **Male / Female**	
Physical Address: _____ _____ _____ _____ Postal Code: _____	
Postal Address: _____ _____ _____ _____ Postal Code: _____	

District Municipality: _____

Local Municipality: _____

Ward: _____

Address Whilst Studying:

_____

_____

_____

_____

Postal Code: _____

Home Telephone Number: [Area Code] _____ [Number] _____

Cell Number: _____ E-mail: _____

Alternate Contact Person: _____

Cell Number: _____ E-mail: _____

Relationship to Applicant: _____

Are you currently employed? **YES/NO**

If YES, please elaborate_____

_____

_____

Have you ever been convicted of a criminal offence, dismissed from employment, expelled from school or requested to leave? **YES/NO**…….

If YES, please furnish full details on a separate sheet of paper.

Have you ever been found guilty of a doping offence? **YES/NO** **If YES**, please furnish full details on a separate sheet of paper.
Have you previously received or currently receiving a Public Service Bursary (NSFAS)? **YES/NO**…… **If YES** please indicate the year/s and period: _____
Are/Were you in possession of another bursary/scholarship/ financial aid (What percentage did you receive)? **YES / NO** **If YES,** please indicate the name of the donor/organization: _____
Obligations attached to the bursary/scholarship/ financial aid: _____ _____ _____
Have all the obligations been fulfilled? **YES /NO If NO,** please elaborate. _____ _____ _____

2. ACADEMICS

CURRENT / LAST INSTITUTION ATTENDED (2025):

Name: _____ _____

Town / City: _____

Highest level achieved: _____

Date from_____ Date to_____

2.1 Particulars of Schooling Programme

Grade enrollment for 2026_____

Number of years required to complete schooling phase_____

Name of school_____

Address: _____

_____

School contact details_____

2.2 Particulars of Tertiary Programme:

Course of Study (BSc, BCom, etc.) for which you are applying:

_____

Major subjects: _____

Number of years you intend studying for: to complete your qualification_____

Name of Tertiary Institution you intend studying at: _____

Address of Institution: _____

Institution contact details_____

Did you consult a vocational counselor regarding your choice of study? (Circle answer) **YES/NO**

Provisional acceptance from the tertiary institution at which you intend studying attached:

RECEIVED/NOT RECEIVED ☐ ☐

University and/or other post school training/studies

If YES, complete the following:

Name of institution/college: _____

Address of institution/college: _____

Student number at current institution: _____

Name of degree/diploma: _____

Current year of study: _____

Indicate the year you started studying for the current course of studies: _____

List the subjects passed thus far: _____

_____

_____

_____

List the subjects that still need to be completed to obtain the relevant qualification:

_____

_____

_____

_____

Have you ever failed any year of study? **YES/NO (**Circle answer) Which year?

…….

Have you rewritten the examination/s for the subject/s failed? If yes, please indicate the details:

3. INCOME AND DETAILS OF PARENT / GUARDIAN

(Affidavit to be attached)
Please indicate the annual gross income of your parent or legal guardian should you be dependent on them during the course of your intended studies (please tick the relevant option):

Single parent/guardian LESS THAN R60 000 per annum ☐

Combined both spouses LESS THAN R120 000 per annum ☐

Combined both spouses MORE THAN R120 000 per annum ☐

Full name of parent/legal guardian (if applicable)

Contact details of parent/legal guardian**:**

Tel Number: _____

Cell phone number: _____

Address of parent/legal guardian: _____

_____

_____

Employer of parent/legal guardian: _____

Address of employer of parent/legal guardian: _____

_____

_____

4. SPORT PARTICULARS /ACTIVITIES

Sport/s code for which applicant is applying: _____

School / Team currently representing

_____

Current Coach_____

Coach's Telephone Number: _____Cell Number: _____

Have you had any injuries/illness in the past 12 months? (Circle answer) **YES/NO**

Nature of illness/injury: _____

If yes, have you completely recovered? (Circle answer) **YES/NO**

List of Achievements (complete the table below):

- Indicate year played.
- Indicate sport played.
- Indicate position e.g. flyhalf for rugby, Goal-shooter for netball.
- Indicate level played e.g. school 1st team, KZN U19A SA Senior.
- Where applicable include achievements e.g. Times for athletics, Olympic Gold.
- Letter from coach/ sport federation confirming your achievement must be attached

YEAR (November 2024 to Date 2025)	SPORT	POSITION	LEVEL	ACHIEVEMENT

5. REVIEW, SUSPENSION AND EXTENSION

The Department reserves the right, at any time and on any terms or conditions to:

a) review the continuation of the bursary; or
b) suspend the bursary; or
c) having suspended the bursary, reinstate the bursary; or
d) extend the period of the bursary.

6. DECLARATION

I (student's name/s) _____

declare that I have, in this application, made complete and accurate disclosure of the required information. I understand that it is my responsibility to provide this information, and that the department is entitled to rely on the information provided by me without further checking or verification. I understand that if any of the information which I have provided is inaccurate, incomplete, not up-to-date, or misleading, even if the information was given by me in good faith and without negligence, the department will be entitled to summarily cancel, reduce or revoke any financial assistance which it has provided, and/or require me to refund any such financial assistance.

SIGNATURE OF APPLICANT		**DATE**	
SIGNATURE OF WITNESS		**DATE**	
SIGNATURE OF WITNESS			

I have checked the information provided by my son/daughter in this application for a sports scholarship from the Department and confirm that it is accurate, complete, up-to-date and not in any way misleading. I have also read the declaration signed by my son or daughter, as set out above, and I understand the consequences that may ensue if any of the information given in this application is inaccurate, incomplete, not up-to-date or misleading.

NAME OF PARENT/GUARDIAN		**DATE**	
SIGNATURE OF PARENT/GUARDIAN		**DATE**	
SIGNATURE OF WITNESS		**DATE**	
SIGNATURE OF WITNESS		**DATE**	

7. QUALIFYING CRITERIA:

a. Applicants must be South African Citizens, residing in KwaZulu-Natal and whose parents/guardians are residents of KwaZulu-Natal.

b. Talented athletes who have:

- Represented the country and excelled at national/international sporting competitions in a specific code/s of sport.
- Athletes who have recorded podium positions at national competitions.
    - Rein the case of team sport, applicants must have played sport at national level in the previous two years and where evidence can be provided.
- Talented learners that have been identified through the implementation of the School Sport Programme and who must have represented the province at the National Primary and Secondary Schools Championships, Schools Winter, Summer or Autumn Games and where performances can be substantiated.
- Talented athletes who have been identified for the Department's Elite Athlete Development Programme (EADP) and/or Academy and Sport Focus School System.

c. Preference will be given to applicants who are able to demonstrate the potential for academic success and which must be substantiated by the appropriate academic record. In the case of tertiary student's applicants, must also meet the requirements for enrolment in the relevant faculty or programme at a recognised tertiary institution (University, University of Technology, TVET Colleges, etc.).

d. Applicants should be able to display performances from the period November 2024 to date (2025)

e. Preference will be given to applicants who are prepared to bind themselves contractually to serve the Province in their particular code of sport.

DOCUMENTATION:

- Include **certified copies** of your ID document/birth certificate
- Include **certified copies** of your latest results for the 2025 academic year
- **Acceptance letter** for intended study in 2026
- **Payslip**/**Bank Statement** confirming your parents or guardian's income
- **Written confirmation** (on letterhead) from your coach and/or the Federation regarding your level of sporting achievements
- **Declaration** of any other bursary/scholarship/sponsorship for study purposes in 2026