



PRASA BURSARY APPLICATION

PART-TIME POST GRADUATE AND ADVANCED DIPLOMA STUDIES

TO: THE HUMAN RESOURCE MANAGER
PRASA Bursaries Department
30 Wolmarans Street
Umjantshi House
BRAAMFONTEIN

APPLICANT DETAILS

Title: _____ Surname: _____

First Names: _____

ID Number: _____

Age: _____

Address: _____

Tel/cell. No: _____

Have you previously studied with PRASA or Metrorail Bursary: _____

If so, when: _____

(1) INTENDED STUDIES (what would you like to study):

CURRENT QUALIFICATIONS:

Highest Qualification: _____

Post Matric Qualification: _____

Training Institution: _____ Registration Date: _____

Signature of applicant: _____ Date: _____

FOR OFFICIAL USE ONLY:

RECOMMENDED:

Name: _____ Surname: _____

Designation: _____ Date: _____

Signature: _____
(Head of Department/Unit)

APPROVAL OF BURSARY BY HUMAN RESOURCES

APPROVED Name: _____ Surname: _____

Designation: _____ Date: _____

Signature _____

