military veterans
Department:
Military Veterans
REPUBLIC OF SOUTH AFRICA

TERTIARY EDUCATION — NEW APPLICATIONS 2021
PUBLIC INSTITUTIONS ONLY

Closing Date: 21 December 2020 to 31 March 2021

*This form must be **completed in full**, failure to do so will result in disqualification and no further consideration for continuous education support will be allowed.*

*• All fields are compulsory • Complete in **CAPITAL LETTERS** and black ink. Mark with 'X'*

- ***No late forms will be accepted after the closing date***
- ***Incomplete applications** will be automatically disqualified*

Personal details

First Names of **Military Veteran** (in full as per ID document)

Surname of **Military Veteran** (in full as per ID document)

Military Veteran/Guardian Cell Number

ID number of **Military Veteran**

Email Address:

First Names of **Student** (in full as per ID document)

Email Address student

Surname of **Student** (in full as per ID document)

ID Number of **Student**

Student Cell Number

Student Disability Status (Mark X):

Disabled	Yes		No	

If Yes, state Disability

Student Equity Status (Mark X):

Equity Status	Male		Female	

Current Residential or Postal Address of student

Post Code

Have you ever received Education Support from DMV (YES/NO)	

If **YES**, in which year and what qualification	**Qualification:**		**Year:**	

IMPORTANT NOTICE ON EDUCATION SUPPORT

NB: **Closing Date: 31 March 2021**

All required documents must be certified and attached to the 2021 application form (Certification must not be older than 3 months) ***Mandatory***

1. Latest Academic transcripts 2020 *Mandatory*
2. Proof of acceptance/enrolment letter at the Institution for 2021 (Official Signed Letter) *Mandatory*
3. ID document of the student. *Mandatory*
4. Unabridged birth certificate. *Mandatory*

DECLARATION BY THE STUDENT (COMPULSORY)

I, the undersigned (Full Names) _____ am the Student whose details appear in this form;

The completed content of the said form falls within my personal knowledge, unless stated otherwise and are both true and correct;

I further permit the Department of Military Veterans to conduct verification of any information provided if required.

_____ **STUDENT SIGNATURE**

_____ **DATE**

TO BE COMPLETED BY THE INSTITUTION (COMPULSORY)

Name of the Institution

Province of Institution (Compulsory)	
Name of Qualification (Compulsory)	
Indicate the Entire Duration of the Qualification (e.g.1 yr course, etc.)	
Name of the Course in 2021 (Compulsory)	
Indicate the year of study in 2021(e.g. 1st, 2nd, 3rd etc.)	
Has the student been accepted at the institution for 2021? (Yes/No)	
Institution Email Address	

I, declare that the applicant is a bona fide student in the Institution and the information provided is true and correct.

Initials and Surname Registrar: _____

Signature of the Registrar: _____

Date:

_____

Compulsory Institution Stamp

COMPLETED CONFIRMATION FORM SHOULD BE SUBMITTED OR POSTED (REGISTERED MAIL) TO THE FOLLOWING ADDRESS:

Postage Only –
See postal address for the Provincial Education Department below

Hand Delivery
Nearest Department of Military Veterans Provincial Office, **Provincial Education Department** or **Office of the Premier**

FOR OFFICE USE ONLY

2021 NEW APPLICANT REFERENCE NO: _____

Is application completed in Full? **Yes/No**	Is the form dated and Signed? ***Yes/No***	Latest Educational progress report? ***Attached/Not Attached***	Letter of acceptance Into Institution? ***Attached/Not Attached***	Database verification **Attached /Not attached**	Unabridged birth certificate **Attached /Not attached**	ID copy of Student **Attached/ Not attached**

APPLICATION RECEIVED AND CHECKED BY: _____ **(NAME IN PRINT)**

_____
(SIGNATURE)

DATE APPLICATION RECEIVED: _____
(DD/MM/YYYY)

Compulsory Official Stamp