BURSARY APPLICATION FORM 2026

Sugar Industry Trust Fund for Education
PO Box 700, Mount Edgecombe, 4300
Tel: 031 508 7034 Fax: 031 508 7191
www.sitfe.co.za bursaries@sasa.org.za

1 Applicants must be:

1.1 Registered or have applied in the **Faculties Agriculture** at a College of Agriculture or University of Mpumalanga

2 All applications must reach the South African Sugar Association before or on Friday**, 21 November 2025.**

3 This application form must be completed in full. **PLEASE REFER TO CHECKLIST**.

4 Do not attach any original certificates or testimonials, as these cannot be returned.

5 We reserve the right to withdraw bursaries awarded to students who accept other full bursaries or loans.

6 Shortlisting will be done in first week of **December 2025**. Shortlisted candidates will be required to attend interviews in mid December 2025.

7 Initial shortlisting will be based on your Grade 11 final results and Grade 12 June results or latest Tertiary results.

8 Final selection will be based on your final Matric results.

9 If you do not hear from us by **31 January 2026,** please consider your application unsuccessful.

A. PERSONAL DETAILS

SURNAME **TITLE**

FIRST NAMES

MARITAL STATUS Single Married

DATE OF BIRTH

IDENTITY NUMBER

VOLUNTARY DISCLOSURE

RACE African / Coloured / Indian / White / Other, specify

Disability

If yes, specify

GENDER

NAME OF YOUR TOWN

PROVINCE (Please tick your province)

KwaZulu-Natal province

Mpumalanga province

Other (specify)

PLEASE TICK THE COURSE YOU WISH TO STUDY OR ARE STUDYING

Mechanical Engineering

Electrical Engineering

Chemical Engineering

Science (specify major(s))

Agriculture (specify major(s))

Other (specify)

INSTITUTION(S) APPLICANT REGISTERED WITH OR APPLIED TO

CENTRAL APPLICATIONS OFFICE (CAO) NUMBER (If applicable)

YOUR HOME/PHYSICAL ADDRESS	POSTAL ADDRESS
CODE	CODE
YOUR CONTACT PHONE NUMBERS	YOUR CONTACT CELLPHONE NUMBER
YOUR CONTACT E-MAIL ADDRESS	ALTERNATIVE E-MAIL ADDRESS
TELEPHONE NUMBER OF RELATIVE	CELLPHONE NUMBER OF RELATIVE
TELEPHONE NUMBER OF A FRIEND	CELLPHONE NUMBER OF A FRIEND

DO YOU HAVE ANY RELATIVE WORKING FOR THE SUGAR INDUSTRY (MILLING or FARMING)

IF YES, PLEASE ATTACH PROOF (Salary slip or grower code)	YES	NO

B. CHILD OF SUGARCANE FARM WORKER (If applicable)

IS YOUR MOTHER OR FATHER A SUGARCANE FARM WORKER

IF YES, PLEASE ATTACH PROOF (Salary slip or grower code)	YES	NO

WHAT IS THEIR OCCUPATION AT THE FARM

WHAT IS THE NAME OF THE FARM

C. HIGH SCHOOL INFORMATION

NAME OF SCHOOL

TYPE OF CERTIFICATE OBTAINED
(if completed grade 12)

GRADE 12 LATEST RESULTS (final results or June results - attach a copy of the statement or school report)

	SUBJECTS	RESULTS	
		PERCENTAGE	SYMBOL
1			
2			
3			
4			
5			
6			
7			
8			

D. TERTIARY STUDIES

NAME OF INSTITUTION

STUDENT NUMBER				
YEAR OF STUDY IN 2025	1ST YEAR		2ND YEAR	
	3RD YEAR		4TH YEAR	

CONTACT PERSON AT INSTITUTION	
HIS/HER CONTACT DETAILS	

IF CURRENTLY REGISTERED, PLEASE SPECIFY COURSES
(Also attach full academic record)

1		6	
2		7	
3		8	
4		9	
5		10	

ARE YOU CURRENTLY A BENEFICIARY OF ANY GRANT OR BURSARY?	YES	NO

IF YES, PLEASE STATE THE NAME OF THE FUNDER	

OBLIGATIONS AND CONDITIONS OF THE EXISTING GRANT OR BURSARY

E. FAMILY

DETAILS OF PARENTS (If deceased, please attach copy of death certificate)

NAME & SURNAME OF YOUR MOTHER	
IDENTITY NUMBER OF YOUR MOTHER	
TELEPHONE NUMBER	
NAME OF EMPLOYER	
ANNUAL SALARY (attach proof of income)	
OCCUPATION	

NAME & SURNAME OF YOUR FATHER	
IDENTITY NUMBER OF YOUR FATHER	
TELEPHONE NUMBER	
NAME OF EMPLOYER	
ANNUAL SALARY (attach proof of income)	
OCCUPATION	

DETAILS OF LEGAL GUARDIAN
(To be completed by applicants living or supported by a guardian)

NAME & SURNAME OF YOUR GUARDIAN	
TELEPHONE NUMBER	
NAME OF EMPLOYER	
ANNUAL SALARY (attach proof of income)	
OCCUPATION	

JOINT INCOME OF PARENTS OR GUARDIAN (Application based on "need" will not be considered unless proof of income is attached)

	up to R350 000 per annum		up to R500 000 per annum
	up to R400 000 per annum		up to R550 000 per annum
	up to R450 000 per annum		up to R600 000 per annum

OTHER FAMILY MEMBERS

DO YOU HAVE SISTERS AND BROTHERS?	YES	NO
HOW MANY DO YOU HAVE?		
HOW MANY ARE STILL IN SCHOOL?		

F. ADDITIONAL INFORMATION

Give details of any activity/project (academic or community work) in which you have done well at school and/or in the community

Have you ever visited a sugar cane farm or sugar mill. If yes, please give details of where, when and what your experience was like.

Have you had a part time job	YES	NO

If yes, please describe your duties and state the name of the company

How did you hear about the bursary?

G. YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS THE INFORMATION DETAILED BELOW IS ATTACHED

1 Final Grade 12 Trial and Matric Statement of results OR final Tertiary exam results if already registered at an institution.
2 Documentation providing proof of sugar industry connection, if connected.
3 Proof of family income (pay slip, pension receipts, affidavit detailing income or unemployment).
4 Death certificate if a parent is deceased.
5 Certified copy of your identity document.
6 Confirmation of application / registration at an University, University of Technology or College of Agriculture.

I hereby declare that the information contained in this application form is true and correct. In the event of assistance being granted, I am prepared to enter into the required agreement with SITFE in terms of the rules of SITFE bursary scheme.

Date	**Applicant's signature**	**Guardian's signature (If applicant under 18 yrs)**

BURSARY APPLICATION CHECKLIST

Sugar Industry Trust Fund for Education
PO Box 700, Mount Edgecombe, 4300
Tel: 031 508 7034 Fax: 031 508 7191
www.sitfe.co.za
bursaries@sasa.org.za

Please ensure you have completed the application form and attached the following documents:

√	Tick
	Bursary application form is complete
	Full Tertiary academic record to date or Grade 12 Trial results and Matric certificate
	Documentation providing proof of sugar industry connection, if connected
	Proof of family income (pay slip, pension receipts, affidavit detailing income or unemployment)
	Death certificate if a parent is deceased
	Certified copy of your South African identity document
	Confirmation of acceptance at a College of Agriculture or University

Applicant's signature

POPIA Disclaimer and Notice: By submitting this form, I consent to the use of my personal information, including special personal information (including but not limited to race, health or disability status and academic background), for the purposes of processing this bursary application in accordance with the Protection of Personal Information Act, 4 of 2013 (POPIA).

The allocation of bursaries will be at the discretion of the Trust Fund