

Scholarship Application Form 2014

For high school placement in 2016

Minimum Requirements

- Completing Grade 6 in 2014
- Minimum average of 70%
- Minimum average of 70% for Mathematics and English
- Minimum average of 70% for Literacy and Numeracy in Annual National Assessments (ANA)
- Clearly demonstrate financial need
- South African citizen
- Certified copies of ALL required documentation
- Ambassador of the Foundation's intended profile, demonstrating entrepreneurial attributes:
 - **Intellectual Imagination:** enjoys being creative and innovative
 - **Achievement Excellence:** sets high academic and non-academic standards for self
 - **Courageous Commitment:** must be courageous and determined, brave and persistent
 - **Spirit of Significance:** wants to impact others and make a difference
 - **Personal Initiative:** prepared to take action to address challenges
- Compulsory cellphone number for SMS notifications of application status.

Application deadline 12 September 2014

Post to:

Allan Gray Orbis Foundation
Freepost no: CB 11349
Kloof Street, 8008

Hand Deliver to:

46 Hof Street
Oranjezicht
Cape Town

✓ Compulsory Attachments Checklist:

Please ensure that the following documents accompany this application form:
Incomplete forms and missing documentation will disqualify this application

- Certified copy of birth certificate, ID or passport of applicant
- Certified copy of ID of both parent(s)/guardian(s)
- Certified copy of death certificate(s), if applicable
- Certified copy of Grade 5 (4th term) report
- Certified copy of Grade 6 (2nd term) report
- Certified copy (with the school stamp), of the Grade 6 Annual National Assessment Results (ANA)
- Certified copy of proof of income i.e. most recent payslips, pension income statement, etc of both parents/custodians. If you own a business, please provide income statements
- If not employed, original affidavit(s), stating reasons and period of unemployment. If parent(s)/guardian(s) are self-employed, submit income statement and 3 month bank statements of business
- Signature of both applicant and parent /guardian must be on the application form.

Important:

- Please do not submit any additional supporting documents, eg. Certificates of merit
Only submit the documents requested in the checklist above
- Please do not email or fax application forms
- **Failure to submit documentation will lead to disqualification.**

ATTACH A
RECENT PASSPORT SIZED
PHOTOGRAPH
OF APPLICANT

For Official Use:

Application Reference Number:
AGS _____

Eligible Ineligible

1. DETAILS OF APPLICANT (Please note it is compulsory to complete every section of the form)

Title: Mr / Miss / Ms / (Please circle the appropriate option)		First name(s):	
Surname:		Preferred Name:	
Date of birth: <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>		Gender: Male / Female (Please circle the appropriate option)	
Country of citizenship:		Race: Asian / Black / Coloured / Indian / White (Please circle the appropriate option)	
ID / Passport No: <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"/> <input type="text"/> <input type="text"/>		Please record the ID number reflected on applicant's birth certificate	
Home Address		Postal address <input type="checkbox"/> (Same as home address)	
Street Name & No:		P.O Box	
Suburb :		Suburb :	
City:		City:	
Province:		Province:	
Country:		Country:	
Postal Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Postal Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Home phone: <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"/>		Cell phone: <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"/>	
E-mail Address:		Home language:	
Second language:		Other languages:	
Preferred method of contact: Post / Email / Home phone / Cell (Please circle the appropriate option)			

2. PERSONAL DETAILS OF PARENT/LEGAL GUARDIAN (Information about your parent or legal guardian)

Title: Mr / Mrs / Ms / Dr (Please circle the appropriate option)	First name(s):
Surname:	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Country of citizenship:	Parent / Guardian (Please circle the appropriate option)
Relationship to applicant: (e.g. Mother, Father, Aunt)	Marital status: Single / Married / Divorced / Widowed (Please circle the appropriate option)
ID / Passport No: <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"/>	Occupation:
Home Address	
Street Name & No:	Suburb / Township / Village:
City:	Province:
Country:	Postal Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
E-mail address:	
Home phone: <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"/>	Cell phone: <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"/>
Work phone: <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"/>	Fax: <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"/>
Preferred method of contact: Post / Email / Home phone / Work phone / Cell (Please circle the appropriate option)	
Does the applicant live with you?	

3. DETAILS OF PARTNER OR NEXT OF KIN (of Parent / Legal Guardian – as detailed above; in section 2)

Title: Mr / Mrs / Ms / Dr (Please circle the appropriate option)	First name(s):
Surname:	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Country of citizenship:	Parent / Guardian (Please circle the appropriate option)
Relationship to applicant: (e.g. Mother, Father, Aunt)	Partnership status: Single / Married / Divorced (Please circle the appropriate option)
ID / Passport No: <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"/>	Occupation:
Home Address	
Street Name & No:	Suburb / Township / Village:
City:	Province:
Country:	Postal Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
E-mail address:	
Home phone: <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"/>	Cell phone: <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"/>
Work phone: <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"/>	Fax: <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"/>
Preferred method of contact: Post / Email / Home phone / Work phone / Cell (Please circle the appropriate option)	

4. EMERGENCY CONTACT DETAILS (Should we need to contact you urgently)

Title: Mr / Mrs / Ms / Dr <small>(Please circle the appropriate option)</small>	
First name(s):	Surname:
1 st contact 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"/>	Relationship to applicant: (e.g. Mother, Father, Aunt)
2 nd contact 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"/>	

5. SCHOOL INFORMATION

School name:	
Principal's Details: Title:	Initial/s: Surname:
School's Physical Address:	
Province:	Postal Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Telephone 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"/>	Fax 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"/>
E-mail address:	Website address:

6. WHERE DID YOU HEAR ABOUT THE FOUNDATION'S SCHOLARSHIP?

Please tick the box(es) that apply and provide any specific information in the space provided below:

- | | |
|---------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Presentation at School | <input type="checkbox"/> Allan Gray Orbis Foundation Website |
| <input type="checkbox"/> Brochure received at your School | <input type="checkbox"/> Television (please specify) _____ |
| <input type="checkbox"/> Poster in Your Class Room | <input type="checkbox"/> Radio (please specify) _____ |
| <input type="checkbox"/> Your Teacher / Principal | <input type="checkbox"/> Magazine (please specify) _____ |
| <input type="checkbox"/> You were Nominated | <input type="checkbox"/> Newspaper (please specify) _____ |
| <input type="checkbox"/> Email sent to You | <input type="checkbox"/> Social Media – Facebook |
| <input type="checkbox"/> Fax sent to You | <input type="checkbox"/> Social Media – Twitter |
| <input type="checkbox"/> Allan Gray Candidate - Fellow/Fellow | <input type="checkbox"/> Social Media – YouTube - Scholarship Video |
| <input type="checkbox"/> Allan Gray Scholar | <input type="checkbox"/> Your Local Library |
| <input type="checkbox"/> Family Members | <input type="checkbox"/> Other (Please specify) |
| <input type="checkbox"/> Community Members | |

Specify here: _____

7. FINANCIAL INFORMATION

Please ensure that proof of income is attached to this application before submitting it to us for processing. Failure to provide proof of income will result in the automatic disqualification of the applicant. If any of the applicant's Parents/Guardians is unemployed, an original affidavit MUST accompany this application, stating reasons for, and period of unemployment. If a pensioner please include affidavit as proof.

7.1 Gross Income - Before Deductions

	Income	Job Description
Father/guardian:		
Mother/guardian:		
Spouse/live-in-partner:		
Additional Income: (e.g. aunt/uncle/daughter etc)		
Additional Income: (e.g. aunt/uncle/daughter etc)		
Additional Income: (e.g. aunt/uncle/daughter etc)		
Other Income: (e.g. business/rentals etc)		State type and amount:
Total household income	R	

7.2 Assets (additional information may be requested)

Rent/Own Dwelling	Monthly Rental or Property Value		
Rental House/Flat etc	R		
Own Home/Flat etc	R	Monthly bond repayments	R

7.3 Loans/Debt

Bank/Person/Institution	Year Taken	Duration	Value	Current Balance
TOTAL				

7.4 Number of Family Members Dependent on Family Income and Living in the Home

(Start with Applicant's name)

Name	Age	Relationship (sister/aunt etc)	Employed (Yes/No)	Occupation	Income
1.					
2.					
3.					
4.					
5.					
6.					

7.5 State Your Monthly Living Costs

Rent / Bond payments	R	Electricity	R
Cell phone	R	Water	R
Food	R	Entertainment	R
Car Insurance	R	Telephone	R
Clothes	R	Mnet/TV/DSTV	R
Petrol	R	Other	R
Loans/HP agreements	R	Municipal Rates	R
		TOTAL	R

7.6 Scholarships held by Family Members

	Value
Name of scholarship:	R
Name of scholarship:	R

7.7 Other Scholarships

	Value
Name of scholarship:	R
Name of scholarship:	R

8. ACADEMIC RESULTS

Please ensure that a certified copy of the applicant's Grade 5 final (December) report and Grade 6 mid year (June) report accompanies this Application Form. The reports must reflect the name and grade of the applicant as well as the name of the School. Failure to submit this documentation will result in the automatic disqualification of the applicant.

9. EXTRAMURAL ACTIVITIES

A. Leadership: Please indicate any leadership roles you have held previously or currently hold

Institution (Where)	Position (What)	Year (When)	List any special awards/achievements	Reference
(e.g. Primary School)	(e.g. Class Captain)	(e.g. 2007)	(e.g. Best in grade)	(e.g. Mr AN Other)
If not, state reasons why:				

B. Community Involvement: Please list your involvement in community initiatives that you participate in on a regular basis

Organisation	Nature of Involvement	Period of Involvement	List Any Special Awards /Achievement	Reference
(e.g. Meadows Old Age Home)	(e.g. Reading to the Aged People)	(e.g. 2 years)	(e.g. Major Award)	(e.g. Mr AN Other)
If not, state reasons why:				

C. Sport: Please list your involvement in sports activities that you participate in on a regular basis

Type of Sport	Team	Period of Involvement	List Any Special Awards /Achievement	Reference
(e.g. Soccer)	(e.g. First Soccer Team)	(e.g. 2 years)	(e.g. World Cup)	(e.g. Mr AN Other)
If not, state reasons why:				

D. Culture: Please list your involvement in cultural activities that you participate in on a regular basis

Cultural Activity	Society Name	Period of Involvement	List Any Special Awards /Achievement	Reference
(e.g. Choir)	(e.g. School Choir)	(e.g. 2 years)	(e.g. World Choir Games)	(e.g. Mr AN Other)
If not, state reasons why:				

10. REFERENCE (This section must be completed by the HoD or the Class Teacher)

Kindly provide your fair evaluation of the applicant by completing the **Code of Conduct**. The information will assist us in our selection process. We assure you that the information provided will be held in confidence and will not be disclosed.

A. Code of Conduct

Please evaluate the applicant on the following scale:

5	Excellent	School Rules: Behaviour	
4	Very good	School Rules: Appearance / Neatness / Dress Code	
3	Good	Attendance	
2	Average	Co-operation with other leaders	
1	Poor	Completes on task / projects	

Is there any additional information you wish to share about the applicant?

Has the applicant ever been suspended? If yes, please give reasons

Has the applicant been expelled (put out of the School)? If yes, please give reasons

Has the applicant been a recipient of a bursary/ scholarship? If yes, please state the name

B: School Fees

What are the annual School fees?

Please indicate with ✓ the frequency of payment in previous years?

<input type="checkbox"/>	Regular
<input type="checkbox"/>	Sometimes
<input type="checkbox"/>	Never

C: Parent Involvement

Field	Mark with X	Description
Governing Body		
Parent Teacher Association (P.T.A)		
Projects		
Coaching		
Spectator		
None		

D: Extramural Activities Offered by School

Please list all sporting activities & leadership roles as fulfilled by the applicant.

Sports Activities offered by School	Cultural Activities offered by School	Community Outreach Activities offered by School	Leadership Opportunities offered by School

Thank you for completing this section of the Form.

This reference was given by me, the undersigned, in my capacity as:		
Name of School:		
Title:	Initial/s:	Surname:
Tel: <input type="text"/>	<input type="text"/>	Cell: <input type="text"/>
Email:		

OFFICIAL SCHOOL STAMP
(COMPULSORY)

E: Statement of Integrity

I hereby certify that I have provided accurate information in this application.

Signature of referee:	Date:

11. INFORMATION NOTE TO PARENTS / GUARDIANS

- Submission of this application form to the Allan Gray Orbis Foundation does not automatically guarantee that the applicant will be awarded the Allan Gray Scholarship
- Parents/guardians are encouraged to make application to other Schools and scholarships for admission to Grade 8 in 2016 in order to avoid disappointment, should this application be unsuccessful
- Due to the volume of applications received for the Scholarship, all applicants who do not qualify will be notified via SMS. It is therefore crucial that parents/guardians provide us with a cellphone number in order to facilitate this communication
- Faxed and/or e-mailed copies of the Application Form will not be accepted
- Please ensure that you submit the Application Form in good time, in order to meet the application deadline. Application Forms posted after 12th September 2014 will not be considered
- Please retain a copy of your completed Application Form for your own records
- The decision whether or not to grant the Allan Gray Scholarship is entirely at the discretion of the Foundation. The Foundation is not obliged to give any reasons for deeming applications unsuccessful
- In its final selection, as guided by its founding trust deed, the Foundation aims to reflect the demographics of South Africa.

12. THE SELECTION PROCESS

- Step 1: Submit completed Summary Application Form
- Step 2: Shortlisted applicants will be requested to submit a Supplementary Application Form
- Step 3: Shortlisted applicants will be invited to attend an Interview
- Step 4: Shortlisted applicants will be invited to a 2 day Selection Camp
- Step 5: Scholar Recommendations will be made to our Placement Schools
- Step 6: Awarding of Scholarships and sign Memorandum of Agreement with Foundation and Placement School.

12.1 Placements for Grade 8 in 2016 are available at the Following Placement Schools* Only:

Eastern Cape:		Western Cape:	
Boys	Girls	Boys	Girls
Selborne College	Collegiate Girls' High School	Bishops Diocesan College	St Cyprian's School
Grey High School	Clarendon High School For Girls	Rondebosch Boy's School	Rustenburg Girls' High School

Gauteng:		Kwazulu-Natal:	
Boys	Girls	Boys	Girls
St Alban's College	St Andrew's School For Girls	Michaelhouse	Pietermaritzburg Girls' High School
King Edward VII School	St Mary's School, Waverley		Epworth Independent High School

* Schools are subject to change.

12.2 Possibility of Boarding

This opportunity includes the possibility of boarding. It would therefore be beneficial for you to commence discussions with the applicant about going to a boarding school. Furthermore, every effort is made to place our Scholars at a Placement School within their home province, however the number of places available to the Foundation is limited. Please discuss this possibility with the applicant.

13. STATEMENT OF INTEGRITY

I hereby certify that I have provided accurate information in this application. I authorise all persons or entities to provide any relevant information in their possession to the Allan Gray Orbis Foundation or its agent for use in considering me for admission or verifying my credentials for admission, and I expressly waive any required notice to me. I understand and agree that any misrepresentation or omission of facts in my application will justify denial of admission, the cancellation of admission, or expulsion.

I hereby grant permission to Allan Gray Orbis Foundation to utilise the information provided in this application for the purposes of the Foundation's activities.

This application is my own, honest statement to the Scholarship Selection Committee.

Applicant signature:	Date:
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Parent/Legal guardian signature:	Date:
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