

# " The City of Heritage "



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**ULUNDI LOCAL MUNICIPALITY**  
**MAYORAL TERTIARY REGISTRATION FEE APPLICATION FORM**  
**ACADEMIC YEAR: 2025**

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## IMPORTANT INFORMATION

1. Only **successful applicants** will be contacted.
  2. The **registration fee will be paid directly to the tertiary institution.**
  3. This application form **must be completed in full.** Incomplete forms will not be considered.
  4. **All supporting documents must be attached** to avoid disqualification.
  5. The **closing date** for submission is **17th January 2025.** Late applications will not be accepted.
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## SECTION A: PERSONAL INFORMATION

1. **Full Name:** \_\_\_\_\_
  2. **ID Number:** \_\_\_\_\_
  3. **Date of Birth:** \_\_\_\_\_
  4. **Gender:**  Male  Female  Other
  5. **Contact Number:** \_\_\_\_\_
  6. **Email Address:** \_\_\_\_\_
  7. **Home Address:** \_\_\_\_\_
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(Attach proof of residence )

**SECTION B: PARENT/GUARDIAN INFORMATION**

1. Full Name of Parent/Guardian: \_\_\_\_\_
  2. Relationship to Applicant: \_\_\_\_\_
  3. Contact Number: \_\_\_\_\_
  4. Parent/Guardian Address: \_\_\_\_\_
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**SECTION C: PARENT/GUARDIAN EMPLOYMENT INFORMATION**

1. Is your parent/guardian employed? [ ] Yes [ ] No
  2. Employer Name (if applicable): \_\_\_\_\_
  3. Occupation: \_\_\_\_\_
  4. Monthly Income (Approximate): \_\_\_\_\_
  5. Contact Number of Employer (if applicable): \_\_\_\_\_
  6. If unemployed, specify source of income (e.g., grants, pension etc.) \_\_\_\_\_
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**SECTION D: EDUCATIONAL BACKGROUND**

1. High School Name: \_\_\_\_\_
  2. Highest Grade Passed: \_\_\_\_\_
  3. Year of Matriculation: \_\_\_\_\_
  4. Matric Certificate Number or Statement Reference: \_\_\_\_\_  
(Attach a certified copy of your Matric certificate or statement of results)
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**SECTION E: TERTIARY INSTITUTION INFORMATION**

1. Name of Institution: \_\_\_\_\_
2. Campus (if applicable): \_\_\_\_\_
3. Student Number (if applicable): \_\_\_\_\_
4. Qualification/Course Enrolled: \_\_\_\_\_
5. Duration of the Course: \_\_\_\_\_

6. **Year of Study (e.g., 1st, 2nd):** \_\_\_\_\_  
(Attach proof of admission to a tertiary institution)
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**SECTION F: FINANCIAL INFORMATION**

1. **Are you currently receiving any financial assistance (e.g., bursary, NSFAS)?**  
 Yes (Specify: \_\_\_\_\_)  
 No
2. **Have you applied for other funding opportunities?**  
 Yes (Specify: \_\_\_\_\_)  
 No
3. **Reason for Requesting Registration Fee Assistance:**

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**SECTION G: CHECKLIST OF REQUIRED DOCUMENTS**

Please ensure all documents are attached to your application:

- Proof of Residence in Ulundi
  - Certified Copy of Matric Certificate or Statement of Results
  - Proof of Admission to a Tertiary Institution
  - Certified Copy of Applicant's ID
  - Certified Copy of Parent/Guardian's ID
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**SECTION H: DECLARATION**

I, the undersigned, declare that:

1. All information provided in this form is true and correct to the best of my knowledge.
2. I understand that any false information may result in the disqualification of my application.

3. I authorize Ulundi Local Municipality to verify the information provided in this application.

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**FOR OFFICE USE ONLY**

1. Application Received By: \_\_\_\_\_

2. Date Received: \_\_\_\_\_

3. Application Number: \_\_\_\_\_

**Application Status:**

- Approved [ ]
- Declined [ ]

**Comments/Notes:**

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**Signature of Reviewer:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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