



NATIONAL ARTS COUNCIL OF SOUTH AFRICA
1996

An Agency of the
Department of Arts and Culture

NATIONAL ARTS COUNCIL OF SOUTH AFRICA

APPLICATION FORM FOR FUNDING FOR THE ARTS

It is compulsory to complete all relevant sections of this application form

BURSARY FUNDING

- Arts bursaries for postgraduate South African students for studies in South Africa that begin in 2017.
Complete sections 1, 2 and 4.
- Block Institution Bursaries for undergraduate studies that begin in 2017.
Complete sections 1, 3, 4 and 5.

SUBMIT APPLICATIONS TO THE **NATIONAL ARTS COUNCIL** BY POST OR COURIER:

Direct all queries and requests for additional application forms the NAC:
Telephone: (011) 838 1383 **Email:** funding@nac.org.za

Postal Address:
PO Box 500
Newtown 2113
Johannesburg

Physical Address:
66 Margaret Mcingana
Street Newtown
Johannesburg

CLOSING DATE: 9 SEPTEMBER 2016

GUIDELINES (read these guidelines carefully before completing the application)

- Provide honest and accurate information, if you misrepresent information, your application may be disqualified
- It is compulsory to complete all relevant sections of the application form.
- Complete all relevant sections. If you do not provide all the information required your application will not be assessed. Where information is not applicable to you or your study institution state that it is not applicable by writing "N/A" in the appropriate place on the form.
- Ensure that all the required supporting documents are included in your application.
- Your application form must reach us by the closing date. If your application is received by the closing date, we will send you an acknowledgement of receipt. **Late applications will not be considered.**
- Note that no application or attached documents will be returned to you.
- We will send you a letter to inform you of the outcome of the Council's decision. Of you application is successful. You will be asked to complete a funding contract and return it to the NAC.
- Submit graded exam fee structure (where applicable).
- A certified copy of your identity document should not be older than three months by the closing date. i.e. 9 September 2016.
- Do not submit a passport.
- Incomplete application forms will not be accepted.
- No late documents will be accepted.
- Do not staple or bind you application form.
- All documents should be submitted in A4.

SECTION 1

APPLICATION DETAILS (Complete A, B and C)

A. Art Form

Which of the following art forms is relevant to your field?

Craft Dance Literature Multi-disciplinary Music Theatre/ Drama Visual Arts

Other (Specify): _____

B. Funding Type

Tick the appropriate block:

Individual Bursary	
Block Bursary	

C. Preferred method of Communications: Email: SMS: Fax:

Below is a checklist of compulsory documents to be attached

INDIVIDUAL BURSARY		INSTITUTIONAL BURSARY	
Certified Copy of SA ID		Certified Copy of ID	
Detailed Curriculum Vitae		Course details including fee structures	
2 letters of reference		Annual Report	
Course content/outline		Proof of banking details	
Academic transcript		Results of current student intake	
Fees Structure		Criteria for selecting students	
Proof of banking details of individual and institution		Tax Clearance Certificate	
Letter of acceptance from the study institution		Audited Financial Statements	
Proof of applicant's income			
Proof of parents/guardians income			

For Office Use Only:

Registration Number: _____

SECTION 2

INDIVIDUAL BURSARY APPLICATION DETAILS

Title: _____

Full name/s: _____ Surname: _____

ID no: _____ Date of birth: _____

Mobile: _____ Tel: _____

Fax: _____ Email: _____

Physical address: _____

Province of origin: _____ Municipal District: _____

Postal address: _____ Code: _____

Province: _____ Gender: _____

Race: _____ Age: _____

For which type of bursary are you applying?

Post-graduate study in SA:

Course/Qualification name for which application is being made: _____

Institution name: _____ Faculty or department: _____

Have you already applied to register for the course?: Y N

Have you already been accepted for the course?: Y N (Attached a letter of acceptance and an academic transcript)

Course start date: _____ Course end date: _____ Duration: _____ months _____

Financial breakdown of the course:

Estimated study costs:		Estimated funding Sources	
Item	Amount (R)	Item	Amount (R)
Registration costs		1.	
Tuition costs		2.	
Books and study material		3.	
Travel Costs		4.	
Accommodation and living costs			
Other Costs (Specify):			
Total Study cost (1)		Total Non-NAC Funding (2)	

SECTION 2 CONTINUED...

INDIVIDUAL BURSARY APPLICATION DETAILS

Financial Summary:

Total Study cost (1)	
Less: Total Non-NAC Income (2)	
Total funding required from NAC (1 minus 2)	

Details of other funding that has been confirmed:

Funding organisations/persons	Date of confirmation	Contact name and telephone

Income Details

Include affidavit if you have no income in your household.

State the gross monthly income of the household you reside in: R _____

Are you currently employed?: Y N

State your personal gross monthly income: R _____
(Please provide proof of income)

**Provide a brief motivation to support your bursary application and a motivation for your research proposal:
(Where research proposal/research topic exists) It is compulsory to complete this section**

SECTION 3

BLOCK BURSARY APPLICATION DETAILS

Title: _____

Full name/s: _____ Surname: _____

ID no: _____ Accreditation No: _____

Institution Name: _____ Tel: _____

Mobile: _____ Email: _____

Postal Address: _____ Code: _____

Physical Address: _____

Province: _____ Municipal District: _____

Details of the course/s for which the bursary will be used

Course Name	Course content	Number of students to be supported	Amount requested (R)
Total Block Bursary required from the NAC			

Planned student breakdown for the bursary (Attach a list of 2nd and 3rd year students and their academic records)

	Female		Male	
	Black	White	Black	White
Number of student				

Detailed motivation why the NAC should consider your application:

SECTION 4

DECLARATION FOR POSTGRADUATE STUDENTS

All the information provided in this application is true and accurate to the best of my knowledge. I understand that any misrepresentation of such information is a serious offence that will lead to the disqualification of this application and may result in prosecution.

Full names/s of applicant: _____

Signed: _____ at: _____ on: _____ 2016.

Full name/s of person completing this application on behalf of the applicant (if applicable):

Signed: _____ at: _____ on: _____ 2016.

NB: The NAC does not endorse the charging of fees for assistance in completing this application.

SECTION 5

DECLARATION FOR INSTITUTIONS

I confirm that I have the authority to complete and sign this application on behalf of the organisation named in this application.

I further confirm that the activity for which the organisation is applying falls within the mission and constitution of memorandum and articles of association of the organisation.

All the information provided in this application is true and accurate to the best of my knowledge. I understand that any misrepresentation of such information is a serious offence that will lead to the disqualification of this application and may result in prosecution.

Full name/s of person completing this application on behalf of the organisation:

Designation in the organisation: _____

Signed: _____ at: _____ on: _____ 2016.

Full name of co-signatory office bearer in a management position (optional) _____

Signed: _____ at: _____ on: _____ 2016.