

APPLICATION FOR REBATE

To:

Executive Director: Financial Management and Planning
University of Venda
Private Bag X5050
THOHOYANDOU
0950

I,..... the undersigned, hereby apply
for a rebate

Relevant information in support of the application: (attach .I.D copies or birth certificates)

The family members (brothers/sisters) listed below are:

- dependants (no income of their own)
- under the age of 26 years and
- registered students at the University of Venda for Science and Technology

Student Information

Surname:	
Initials:	
ID number:	
Student number:	
Qualification enrolled for:	

Surname:	
Initials:	
ID number:	
Student number:	
Qualification enrolled for:	

Surname:	
Initials:	
ID number:	
Student number:	
Qualification enrolled for:	

I declare that the preceding information is true and correct.

.....
Signature of guardian/parent

.....
Date

Details of guardian/parent:

Surname:	
Initials:	
ID number:	
Residential address:	

Note: The application will apply to both semester registration periods.

Approved / Not Approved :.....
Executive Director: Financial Management and Planning

Date :.....