



BURSARY APPLICATION FORM 2026

SURNAME			
FIRST NAMES			
AGE			
CONTACT NUMBERS	HOME		MOBILE
ADDRESS			
			CODE

CHECKLIST OF DOCUMENTS INCLUDED WITH THIS APPLICATION (TICK WHERE APPROPRIATE)	
<input type="checkbox"/>	One black and white passport-size photograph
<input type="checkbox"/>	Identity Document / Study Permit for Foreign Nationals
<input type="checkbox"/>	Matric Certificate / Highest Educational Achievement
<input type="checkbox"/>	Letter of Admission from university / Technikon
<input type="checkbox"/>	Proof of income of parents / guardian. If unemployed please provide affidavit
<input type="checkbox"/>	Letter from Imaam supporting your application for a bursary
<input type="checkbox"/>	Motivation Letter

ATTACH PHOTOGRAPH HERE	
------------------------	--

SECTION A: PERSONAL DETAILS

SURNAME													
FIRST NAMES													
NATIONALITY													
IDENTITY NUMBER													
AGE													
CONTACT NUMBERS	HOME							MOBILE					
RESIDENTIAL ADDRESS													
											CODE		
POSTAL ADDRESS													
											CODE		
E-MAIL ADDRESS													

	FATHER / GUARDIAN	MOTHER
NAME		
IDENTITY NUMBER		
HIGHEST QUALIFICATION		
OCCUPATION		
NAME OF EMPLOYER		
EMPLOYER TELEPHONE NO		

NUMBER OF SIBLINGS		
POSITION IN FAMILY		
HAVE ANY OF YOUR SIBLINGS STUDIED FURTHER?	YES	NO
IF YES GIVE DETAILS		

SECTION D: FINANCIAL DETAILS

HOUSEHOLD INCOME (LAST MONTH)	FATHER	MOTHER	TOTAL
a. SALARY			
b. GRANTS			
c. OTHER (SPECIFY)			
GROSS MONTHLY INCOME			

HOUSEHOLD EXPENSES (AVERAGE FOR LAST 3 MONTHS)	TOTAL
a. BOND / RENT	
b. HOUSEHOLD EXPENDITURE (WATER, ELECTRICITY, ETC)	
c. MEDICAL AID	
d. INSURANCE	
e. OTHER (SPECIFY)	
f. OTHER (SPECIFY)	
AVERAGE MONTHLY EXPENSE	

NETT BALANCE AT THE END OF THE MONTH (INCOME LESS EXPENSES)	
---	--

N.B: PLEASE ATTACH A CERTIFIED COPY OF INCOME, IF ANY (NOT MORE THAN ONE MONTH OLD)

SECTION E: DETAILS OF SPONSORS

NAME OF SPONSOR(S) / BURSAR	TELEPHONE NO	AMOUNT PLEDGED

SECTION F: REFERENCES

(LIST FOUR REFERENCES THAT CAN ATTEST TO YOUR ISLAMIC CHARACTER)

PROFESSION	NAME	TELEPHONE NO	MOBILE
TEACHER			
USTAADH			
DOCTOR			
BUSINESSMAN			

SECTION G: DECLARATION BY APPLICANT

I the undersigned applicant undertake to use the bursary / scholarship responsibly in furthering my career, and ensure that it benefits me, my family, siblings and the community I am residing in.

I undertake to re-pay the bursary upon completion of my studies and qualification thereof upon securing employment so that I could in some way, benefit others that are in need of bursary assistance.

In addition to the above, I, the undersigned declare that:

1. I will devote my time to my studies as long as I am a recipient of an AMA(SA) Bursary,
2. I will inform AMA(SA) of my academic performance and activities every semester,
3. I will send my examination results and fees statements to AMA(SA) every semester,
4. I will participate in the programmes and activities organized by AMA(SA), e.g. youth camps, community outreach programmes, seminars, workshops, etc,
5. Once I have completed my studies, I will try to assist in the development of my community and country.
6. On my graduation I commit myself to participating in the Graduates Association,
7. My parents / guardians are not in a financial position to support my education,
8. I understand that I am applying for a Zakah bursary
9. I am eligible to receive Zakah
10. All the information given in this Application Form, its attachments and documents is complete and correct,
11. I authorise AMA(SA) to use my photograph / record of academic achievements in marketing the Bursary Programme,

Signature of Applicant

FOR OFFICE USE ONLY:

1. APPLICANT INFORMATION CHECKED BY: _____
2. CONSIDERED / APPROVED / REJECTED / REVIEWED BY: _____ / _____
3. AMOUNT: R _____ 1ST YEAR / 2ND YEAR OR ONCE OFF