

Ms Pako Modibedi Tel: (012) 664-8459

Fax to email: 087 056-0046 Email: pako@samhsfund.co.za

APPLICATION FOR SAMHS FUND UNDER-GRADUATE STUDY GRANT OPEN 05 JANUARY 2026 AND CLOSE 27 FEBRUARY 2026

Criteria for the allocation of study grants.

- SAMHS Fund study grants are awarded in limited quantity and on merit to SAMHS Fund contributors as approved by the SAMHS Fund Executive Board.
- Grants are available to the principal contributor or one dependent per household.
- The grants, a once off gift voucher of R 2000.00, are only for second or subsequent years
 of under-graduate study and preference is granted to new applicants who have not
 previous been awarded a SAMHS Fund study grant.
- Qualifying institutions: Universities, Universities of Technology and Technical Colleges
- Applications from students studying on state expense will not be considered.
- Students who already receive study bursaries from other institutions will be excluded.
- Note: Fraudulent claims will be managed under the appropriate regulations.

<u>Documentation to please be submitted with the application form by emailed or handed in at the SAMHS Fund Office:</u>

- a. **Certified copy** of student's Identity Document.
- b. **Certified copy** of Examination results of 2025.
- c. **Certified copy** of Proof of Registration for 2026.
- d. Recommendation by GOC / OC / Officer in Charge (Par 8) applicable: In the Force members.
- e. An affidavit is required if the applicant's surname is not the same as the dependant.

1. **DETAILS OF SAMHS FUND CONTRIBUTOR**

ID No:									Fo	rce No:								
Surname	:			 				 			R	lank	α:				 	
Full Nam	es:				 	 	 	 						 			 	
Postal Ad	ddre													 (Cod	e:	 	
Physical																	 	
			_	 	 	 	 	 						 (Cod	e:	 	
Unit:				 	 		 	 						 			 	
Cell no: _		• • •		 	 	 		 Tel	Work	X:				 			 	
Email add	dres	ss: _			 		 	 										

2. APPLICATION IS MADE FOR A STUDY GRANT FOR:
Relationship to contributor (Spouse / Daughter, Son or Self):
ID No:
Surname:
Full Names:
3. DETAIL OF STUDY YEAR: 2026
Name of Institution/University:
Study Course:
Year of Study:
4. I UNDERSTAND THAT THIS GRANT WILL BECOME IMMEDIATELY REPAYABLE IF
The dependant ceases studies during the year.
5. I HEREBY CERTIFY THAT:
Above-mentioned candidate is a bona-fide dependant of mine as defined in Chapter V or General Regulations of the South African National Defence Force and the Reserve; and all information given above is true and correct.
6. BANKING DETAILS FOR ELECTRONIC TRANSFER OF FUNDS FROM SAMHS FUN
Bank: Branch Name:
Branch Code Acc Nr Acc Nr
Cheque Transmission Savings
7. Cell phone number for Bank notification of transfer:
SIGNATURE MEMBER: DATE:
8. Recommendation by GOC / OC / OFFICER IN CHARGE applicable to In the Force Men