

APPLICATION FORM

(Please circle the appropriate option where applicable under each section.)

1. APPLICANT (Factual information about yourself.)

Title: Mr / Miss / Ms / Mx	First name(s):
Preferred Pronoun: He / Him, She / Her, They / Them	Middle name(s):
Surname:	Gender: Male / Female / Non-binary / Genderqueer / Genderfluid / Prefer not to say
Date of birth: <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Race: Black / White / Coloured / Indian / Asian / Mixed race
Country of citizenship:	Do you have any learning barriers or disabilities, whether physical or other? (If yes, please specify)
ID / Passport no:	
<input type="text" value="Y"/> <input type="text" value="N"/>	
Home address	
Postal address	
Street name & no:	P.O Box:
Suburb / Township / Village:	Suburb / Township / Village:
City:	City:
Province:	Province:
Country:	Country:
Postal code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Postal code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Home phone: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Cell: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email address:	Home language:
Second language:	Other languages:
Preferred method of contact: Post / Email / Home phone / Cell	

2. EMERGENCY CONTACT DETAILS (If we need to contact you urgently.)

Title: Mr / Mrs / Ms / Mx / Dr	First name(s):
1 st contact number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Surname:
2 nd contact number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to applicant: (e.g. Mother, Father, Aunt)

3.1. PARENT OR GUARDIAN DETAILS (1) (Please ensure that you have accurately completed all the details of all your guardians and understand that by signing and submitting, you are confirming that these details are accurate and correct. Please ensure that information of both parents or legal guardian is included. If not, please note that an affidavit may be requested from you.)

Title: Mr / Mrs / Ms / Mx / Dr	First name(s):
Surname:	Date of birth: <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Country of citizenship:	Parent / Guardian
Relationship to applicant: (e.g. Mother, Father, Aunt)	Marital status: Single / Married / Divorced / Widowed
ID / Passport no: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Occupation:
Home address	
Email address:	
Street name & no:	Home phone: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Suburb / Township / Village:	Work phone: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
City:	Cell: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Province:	Fax: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Country:	Preferred method of contact:

List all academic achievement awards and/or recognition (please indicate the level of achievement e.g. School, Community, Town, Regional, Provincial, National, International):

5. INTENDED UNIVERSITY STUDIES IN 2026 (in order of preference)

Faculty*	Name of degree	University**

* Faculty choice –Intention to study towards a Commerce, Science (excluding Medicine, Veterinary Science and Dentistry), Engineering, Arts, Law or Humanities degree.

** University choice – The Foundation currently offers the Fellowship opportunity at WITS, UCT, NMU, Rhodes, UWC, SU, UP, UJ, UFS, UKZN and TSIBA Business School. You may choose the same university more than once. (Please note: Applicants need to be based at the university of study – no correspondence applicants will be accepted.)

6. EXTRA-MURAL ACTIVITIES (Please list any achievements or awards at high school or community.)

Leadership: Please indicate current or previous leadership roles.

Institution	Position	Duration of involvement	Level	Reference
(e.g. High School)	(e.g. Member of RCL)	(e.g. Jan 2020 – June 2021)	(e.g. School, Community, Town, Regional, Provincial, National, International)	(e.g. Mr A.N. Other)

Community service/involvement: Please indicate any community involvement in which you participate or have participated.

Organisation	Nature of involvement	Duration of involvement	Level	Reference
(e.g. Rotary Club)	(e.g. Secretary)	(e.g. 2 years)	(e.g. School, Community, Town, Regional, Provincial, National, International)	(e.g. Ms S.M. Body)

Sport: Please indicate the sports that you play regularly, and the highest level obtained.

Sport	Level	Provincial/National	Special Achievements	Reference
(e.g. Soccer)	(e.g. School 1 st team)	(e.g. Gauteng province side)	(e.g. Best player of the year)	(e.g. Mrs J. Doe)

WHERE DID YOU HEAR ABOUT US?

Please tick the box(es) that apply and provide any specific information in the space provided below:

- | | | |
|--|---|------------------------------------|
| <input type="checkbox"/> Allan Gray Orbis Foundation Website | <input type="checkbox"/> Poster / Flyer / Brochure | <input type="checkbox"/> TTP |
| <input type="checkbox"/> Allan Gray Entrepreneurship Challenge | <input type="checkbox"/> Columba Leadership | <input type="checkbox"/> EWETS |
| <input type="checkbox"/> An Allan Gray Fellow | <input type="checkbox"/> School Teacher / Principal | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> School Visit / Presentation | <input type="checkbox"/> iDestiny | <input type="checkbox"/> Instagram |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Kagiso Trust | <input type="checkbox"/> Twitter |
| <input type="checkbox"/> Smart Foundation | <input type="checkbox"/> SSP | <input type="checkbox"/> LinkedIn |
| <input type="checkbox"/> Other | | |

If "other", please specify: _____

FINANCIAL SUPPORT

- Successful Candidates with a combined annual household income of **R1 million and below** will receive full funding.
- Successful Candidates with a combined annual household income **above R1 million** will receive needs-based funding.

< R1 Million	< R1.5 Million	≥ R1.5 Million
<ul style="list-style-type: none"> ✓ Tuition Fees ✓ Tutoring Sessions ✓ Counselling Services (ICAS) ✓ University Accommodation and Meals ✓ Book Allowance ✓ General Monthly Allowance 	<ul style="list-style-type: none"> ✓ Tuition Fees ✓ Tutoring Sessions ✓ Counselling Services (ICAS) ✓ University Accommodation and Meals 	<ul style="list-style-type: none"> ✓ Tuition Fees ✓ Tutoring Sessions ✓ Counselling Services (ICAS)

Potential funding will be communicated to successful candidates after camp stage.

STATEMENT OF INTEGRITY

I hereby certify that I have provided accurate information in this application. I authorise all persons or entities to provide any relevant information in their possession to the Allan Gray Orbis Foundation or its agent for use in considering me for admission or verifying my credentials for admission. I expressly waive any required notice to me. I understand and agree that any misrepresentation or omission of facts in my application will justify denial of admission, the cancellation of admission or expulsion. I hereby grant permission to the Allan Gray Orbis Foundation to utilise the information provided in this application for the purposes of the Foundation's activities. This application is my own honest statement to the Admissions Committee.

CONSENT

By signing this application, you are giving the Allan Gray Orbis Foundation, consent to:

- Share your personal information with internal and external assessors for assessment purposes and any other related purposes
- Use your personal information for research statistical, monitoring and evaluation purposes (full confidentiality will be observed)
- Store your personal information on our data management system
- Take pictures and video recordings during the interview and selection camp stages, should you be successful. These pictures and recordings can be used for marketing purposes
- Undergo all assessment that form part of the Allan Gray Orbis Foundation selection process
- Share your details with other bursary providers, should you be unsuccessful for the Fellowship opportunity
- Share the outcome of your application with your school, Department of Education District officials or universities
- Share your personal information with any of the other entities forming part of Allan & Gill Gray Philanthropies for the purposes contained in this consent section and any other related purposes

Allan Gray Orbis Foundation confirms that it has sufficient security measures in place to ensure the integrity and confidentiality of the Personal Information received and where transmitted to member entities of Allan & Gill Gray Philanthropies.

While you may, unless legislation requires the processing, object to the processing of your personal information by Allan Gray Orbis Foundation, such objection may impact the abilities of Allan Gray Orbis Foundation to process and assess your application. You may at any time access the personal information and may further request rectification of the personal information, should this be necessary.

Applicant's signature: _____

Date:

Parent's / Legal guardian's signature (if under 18): _____

Date:



Allan Gray Orbis Foundation undertakes to protect your personal information and to ensure that it is not used for any purpose outside of this application process.