

SECTION D: DECLARATION

1. I hereby, declare that ALL information provided is TRUE and CORRECT to the best of my knowledge.
2. I understand that any incomplete / false information will render this application null and void.
3. Signature of Applicant:

_____ Date: _____

4. Signature of Parent/Guardian:

_____ Date: _____

NB: Please return completed form to the Development and Alumni Relations office (41/43 ML Sutan Road, behind information centre) or Email alumni@dut.ac.za

Required documents checklist

- Academic Results
- Proof of Income or Relevant Documents
- Other

FOR OFFICIAL USE ONLY

Application Status		Reasons/ Motivation
Successful		
Unsuccessful		

Evaluation committee (Chairperson) signature:

_____ Date: _____