



POPIA Consent Form for Bursary Applicants

This form records the bursary applicant's informed consent to the collection, use, storage, verification, and, where applicable, sharing of personal information for the purpose of assessing, administering, and managing a bursary application and any related support processes, in accordance with the Protection of Personal Information Act 4 of 2013 (POPIA). Please complete all relevant sections and sign where indicated.

1. Responsible Party Details

Organisation name: _____

Registration number (if applicable): _____

Physical address: _____

Contact number: _____

Email address: _____

Information Officer / Contact person: _____

2. Bursary Applicant Details

Full name and surname: _____

Applicant ID / Passport number: _____

Contact number: _____

Email address: _____

Physical address: _____

School / tertiary institution: _____

Current grade/year of study: _____

Qualification/programme applied for: _____

Parent/guardian name and contact details (if applicable): _____

3. Personal Information to be Processed

For bursary application, assessment, verification, and administration purposes, the organisation may collect and process the following categories of personal information:

- Applicant identification and contact details
- School, college, or university details and student number (where applicable)
- Academic results, transcripts, reports, and proof of registration or acceptance
- Qualification, field of study, career interests, and supporting motivation information
- Household income information, financial need information, and related supporting documents
- Parent, guardian, or next-of-kin details where relevant to the application
- Any additional information or documents voluntarily submitted in support of the bursary application

Reg Nr:

2016/366168/07

VAT Nr:

4870279884

Address:

HQ First Floor, 353 Festival Street,
Hatfield, Pretoria,
0180

Phone:

012 111 8476

Director:

DJ Swart

Email:

info@finxbee.co.za

www.finxbee.co.za



4. Purpose of Processing

Your personal information will be collected and processed for the following bursary-related purpose(s):

- To evaluate eligibility, merit, and financial need in relation to the bursary application;
- To verify information provided, communicate with the applicant, administer any awarded bursary, and provide related academic or support programme services where applicable.

5. Disclosure and Retention

Your personal information may be shared, only where necessary and lawful, with authorised employees, bursary administrators, selection committee members, funding partners or sponsors, educational institutions, verification service providers, and regulators or other third parties where disclosure is required by law or necessary for bursary administration. Records will be retained only for as long as reasonably necessary to process and administer the application or bursary, and to meet legal, audit, funding, and operational retention requirements.

6. Data Subject Rights

I understand that I have the right to:

- be informed of the personal information being collected and the purpose for collection;
- request access to my personal information;
- request correction, updating, or deletion of inaccurate or excessive personal information, subject to applicable law;
- object to processing in certain circumstances;
- withdraw consent where processing is based on consent, subject to legal or contractual limitations.

7. Consent

Please initial or tick the statements that apply:

☐ I consent to the collection and processing of my personal information for purposes related to my bursary application, evaluation, and, if successful, bursary administration.

☐ I consent to the verification of information and supporting documents submitted with my bursary application, including academic and financial information where relevant and lawful.

☐ I understand that my consent is voluntary, but that failure to provide the required personal information may result in my bursary application not being considered or fully processed.

☐ I confirm that the information and supporting documents provided by me are true, accurate, current, and complete to the best of my knowledge, and that I understand how my personal information will be used and protected.

8. Signature

Bursary applicant name: _____

Signature: _____

Date: _____

Place: _____

Parent/guardian signature (if applicant is under 18 or where required): _____

Parent/guardian name: _____

For and on behalf of the organisation (if required): _____

Name: _____

Signature: _____

Date: _____

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