



## DEPARTMENT OF SOCIAL DEVELOPMENT OR SCHOOL PRINCIPAL DECLARATION

The National Student Financial Aid Scheme (NSFAS) requires personal information from agencies relating to parent/guardian-child relations of applicant. NSFAS is committed to ensuring that the personal information obtained from third parties is treated confidentially to protect the privacy of the persons whose personal information is made available to NSFAS. NSFAS is further committed to protecting the personal information and to use that personal information in a lawful manner. Kindly note that NSFAS is exempt from processing data to the extent that it is in pursuance of its public duty. NSFAS thus reserves the right to validate all information and details provided by the applicant and parent/guardian against independent third-party data sources.

I confirm that by voluntarily submitting any personal information to NSFAS, in any form, it constitutes an indefinite, unconditional and specific consent for NSFAS to share such personal information with third parties, and to obtain relevant information from third parties.

ID NUMBER OF APPLICANT

[illegible]

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I, the undersigned \_\_\_\_\_ (Full Name and Surname of applicant) do hereby declare that I concur with the statements of my guardian below and that the following statements are true,

By signing this form, I acknowledge and am aware that if NSFAS discovers that this declaration is false, that I will be required to repay all NSFAS funds for all academic years and may be held criminally liable.

[illegible][illegible]

30 - 17 = 13

Y	Y	Y	Y	M	M	D	D
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I, the undersigned \_\_\_\_\_ (Full Name and Surname of parent/ guardian 1);

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I, the undersigned \_\_\_\_\_ (Full Name and Surname of parent/ guardian 2);

[illegible]

I do hereby declare that I concur with statement by the applicant above, and that the following are true:

- a) I do not know my mother/ nor her whereabouts and cannot provide her ID number or any other documents as a means of identification.
- b) I do not know my father/ nor his whereabouts and cannot provide his ID number or any documents as a means of identification.
- c) None of my surviving family know my parents/ nor their whereabouts and cannot provide their ID numbers or any documents as a means of identification.
- d) I do know my parent(s) and their whereabouts, but NSFAS cannot verify our parent-child relationship.

Please explain the circumstances that led to you becoming the guardian of this Applicant:

Please indicate as of what date you assumed the role of guardian for this Applicant:

Y	Y	Y	Y	M	M	D	D
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By signing this form, I acknowledge and am aware that if NSFAS discovers that this declaration is false, that I will be held personally responsible for all NSFAS costs in respect of this applicant and may be held criminally liable.

Y	Y	Y	Y	M	M	D	D
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