



WORK INTEGRATED LEARNING (WIL) FUNDING APPLICATION FORM 2026/2027

Application form for Work Integrated Learning (WIL) Funding Window

Submission requirements:

- Stakeholders must apply online via BANKSETA MIS platform available on BANKSETA's website on the following link: SIMS
- Stakeholders may utilize the online DG manual link to complete the registration and application: <https://sims.bankseta.org.za/>
- Training to apply online and method of registration on the BANKSETA MIS will be provided in the compulsory briefing session to be held on MICROSOFT TEAMS on the **18 June 2026 at 10h00**. Attendance of the briefing session is compulsory.
- Post briefing session recording may be accessible upon request
- The Application form must be completed in full and duly signed. This form must be uploaded to the BANKSETA system when applying online. Failure to do so will result in disqualification of the applications.
- The closing date for submitting the application is **9 July 2026 at 16h00pm**. No late applications will be accepted.
- Institution to ensure that learners participating on the BANKSETA Work Integrated Learning programme are not funded by other public funders i.e. SETAs.
- Applicants agree to provide information as required by BANKSETA for the purpose of reporting to the Department of Higher Education and Training, as well as other statutory stakeholders
- Applicants must keep a copy of their submission for their internal use and backup purposes.

Closing date: 16h00 on 9 July 2026.

No late applications will be accepted.

Communication of decisions

Decisions in respect of work integrated learning (WIL) funding applications will be communicated by e-mail to applicants once evaluation and approval of outcome has been concluded

Please indicate the applicant's institution:

Institution	Tick
University of Technology	
TVET Colleges	

Please indicate the WIL training period you are applying for to host learners:

Institution	Duration	Tick
University of Technology	12 Months	
TVET Colleges	18 Months	

1. Applicant Details

Institution Name	
Physical Address:	
Postal Address:	
Work Integrated Learning Head of Department (1st contact)	Cell phone: Landline: Email address:
Work Integrated Learning Administrator/ coordinator (2nd contact)	Cell phone: Landline: Email address:

2. Application Details

Number of Learners applying for	
Stipend amount applying for	Please note the capped amount as per the funding window guidelines
2.5% admin fee applying for	Please note the capped amount as per the funding window guidelines
2% UiF contribution	Cost must include the 2% calculation apportioned for the Unemployment Insurance Fund (UiF) mandatory contribution
Total amount applying for	
Project Costs	<i>You are required to include stipends/admin and UiF costs in your application. Note that the BANKSETA will be responsible for the monthly payment of both stipends and UiF.</i>
Province where Learners will be placed	
Local Municipality where learners will be placed.	
District Municipality where learners will be placed.	

Learner Qualifications	Applications must be in support of skills identified in the BANKSETA Sector Skills Plan.
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Learner Details

Note: When allocating funding BANKSETA may prioritize provinces, municipalities, rural areas, woman, and people with

Municipality	Black / Coloured / Indian		White		Learners with disability		Youth (max 35 years old)	TOTAL
	Male	Female	Male	Female	Male	Female		
TOTALS								

disabilities.

BANKSETA will prioritise programs leading to occupations in high demand.

3. Declaration

I _____ declare that:

- A) The learners for which I have applied, have not already received grant funding from another source (donor, SETA, funding agent), for work integrated learning
- B) I will inform the BANKSETA of the successful completion and / or permanent employment of the learner/s
- C) I will obtain the learners' consent to share and communicate their personal information, in respect of the requirements to access this funding. This is as defined in the Protection of Personal Information Act No. 4 of 2013; and
- D) In the event the College is approved to implement this project that the funds will only be used for the purpose it was intended.

Name of Institution representative: _____

Title/Capacity of Institution representative: _____

Signature of Institution representative: _____

Date of signature: _____