



REPUBLIC OF ZIMBABWE — MINISTRY OF VETERANS OF THE LIBERATION
STRUGGLE AFFAIRS

WAR VETERANS EDUCATIONAL ASSISTANCE BENEFIT

(Chapter 17:12)



LWV2
FORM CODE

EDUCATIONAL ASSISTANCE FORM — DATA INPUT FORM

PROVINCE: _____

DATA INPUT FORM

***NOTE: COMPLETE IN TRIPLICATE AND IN CAPITALS. USE BLUE OR BLACK INK. ALL FIELDS MUST BE COMPLETED FOR THIS APPLICATION TO BE ACCEPTED FOR PROCESSING.**

PART I — APPLICANT'S DETAILS (TO BE COMPLETED BY THE PARENT, GUARDIAN OR THE APPLICANT)

a. Pension Number (Primary Beneficiary)

b. National ID (Primary Beneficiary)

c. Surname (Primary Beneficiary)

d. First Name (Primary Beneficiary)

e. Middle Name (Primary Beneficiary)

f. Category of Primary Beneficiary (Tick Applicable)

Trained Fighter	☐
Ex-Political Prisoner, Detainee or Restricttee	☐

g. Parent / Guardian / Applicant's Phone Number

Email Address

PART II — STUDENT'S DETAILS

a. Student's Birth Entry Number

b. Student's Date of Birth (DD-MM-YYYY)

c. Sex (M/F)

d. Student's First Name

e. Student's Middle Name

f. Student's Surname

(Certificate of guardianship or other acceptable proof of parentage or dependency is required where the student's surname differs from that of the Primary Beneficiary)

g. Total Assistance Being Requested

Day (DAY) ☐ Boarding (BOR) ☐

Amount if Known



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PART III — SCHOOL / INSTITUTION DETAILS

[illegible]

Level	Tick	Class	Term / Semester
Primary	☐		
Secondary	☐		
College / Vocational	☐		
University	☐		
Other (Specify: _____)	☐		

c. Breakdown of Fees Required (As per Invoice)

Tuition Fees	\$	c
Exam Fees	\$	c
Boarding / Residence Fees (On Campus or Equivalent)	\$	c
Development Levies	\$	c
Other (Specify: _____)	\$	c
TOTAL REQUIREMENT	\$	c

Account Name	
Name of Bank	
Branch of Bank	
Account Number	
Swift Code	



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PAGE 3 OF 3 — AFFIRMATION, CHECKLIST & OFFICIAL USE

PART IV — APPLICANT'S AFFIRMATION AND SIGNATURE

I _____ (Name in Full), being _____ (status or relationship to Primary Beneficiary), National Registration Number _____ and residing at _____

(Full Physical Address) do hereby affirm and attest that the details I have provided in Part I of this application are true, accurate and authentic.

Thus signed at _____ (Province) this day _____ (DD-MM-YYYY).

Parent / Guardian or Applicant's Signature: _____

Action Checklist: Confirmation and verification of originals of all certified documents submitted in support of the application (To be completed by the receiving Officer who must tick when done)

Required Document	Tick
War Veterans ID Card	☐
Long Birth Certificate of Student	☐
Death Certificate of Primary Beneficiary (If deceased)	☐
Marriage Certificate (In case applicant is a widow, widower or divorcee of Primary Beneficiary)	☐
School / Institution Invoice with banking details and registration number	☐
National ID Card of Guardian, Parent or Applicant	☐
Proof of Receipt of the Last Payment made by the Ministry for the particular student	☐

PART V — FOR OFFICIAL USE ONLY

Role	Initials	Surname	EC Number	C/D	Signature
Received By					
Verified By					
Entered By					
Approved By					

NOTE: C/D stands for Check Digit | All fields are mandatory | Chapter 17:12