ANNEXURE A: PERSONAL INFORMATION REQUEST FORM

PERSONAL INFORMATION REQUEST FORM

Please submit the completed form to the Information Officer:

Name			
Contact Number			
Email Address:			
Please be aware that we may	require you to provide proof of identification prior to processing your request. There may		
also be a reasonable charge f	or providing copies of the information requested		
A. Particulars of Data	Subject		
Name & Surname			
Identity Number:			
Postal Address:			
Contact Number:			
Email Address:			
B. Request			
I request the organisation	n to:		
(a) Inform me whether it	holds any of my personal information		
(b) Provide me with a record or description of my personal information			
(c) Correct or update my personal information			
(d) Destroy or delete a record of my personal information			
C. Instructions			
D. Signature Page			
Signature			
Date			
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