

## **REQUEST FOR ACCESS TO PERSONAL DATA**

## Note

- i. Documentary evidence in support of this request may be required.
- ii. Where the space provided for in this Form is inadequate, submit information as an annexure.
- iii. All fields marked \* are mandatory.

## A. DETAILS OF THE DATA SUBJECT

(This section is to provide the details of the Data Subject).

Name*	
Identity Number*	
Phone number*	
E-mail address*	
(Provide the following details, where making a request on behalf of a minor or a person who has no capacity)  Name*	
Relationship with the Data Subject*	_
Contact Information*	
B. DETAILS OF THE PERSONAL DATA REQUESTED (Describe the personal data requested)	
, , , , , , , , , , , , , , , , , , , ,	
C. MODE OF ACCESS	
[ ] I would like to: (Check all that apply) [ ]	
[ ] I would like to. (Check all that apply) [ ]	
Inspect the record	
Inspect the record  [ ] Listen to the record	
Inspect the record  [ ] Listen to the record  [ ] Have a copy of the record made available to me in the following format [ ]	
Inspect the record  [ ] Listen to the record  [ ] Have a copy of the record made available to me in the following format [ ]  Photocopy (Please note that copying cost will apply)	
Inspect the record  Listen to the record  Have a copy of the record made available to me in the following format []  Photocopy (Please note that copying cost will apply)  [] Number of copies required ]	
Inspect the record  Listen to the record  Have a copy of the record made available to me in the following format []  Photocopy (Please note that copying cost will apply)  Number of copies required ]  Electronic	
Inspect the record  [ ] Listen to the record  [ ] Have a copy of the record made available to me in the following format [ ]  Photocopy (Please note that copying cost will apply)  [ ] Number of copies required ]  Electronic  [ ] Transcript (Please note that transcription charges may apply)	
Inspect the record  [ ] Listen to the record  [ ] Have a copy of the record made available to me in the following format [ ]  Photocopy (Please note that copying cost will apply)  [ ] Number of copies required ]  Electronic	
Inspect the record  Listen to the record  Have a copy of the record made available to me in the following format []  Photocopy (Please note that copying cost will apply)  [] Number of copies required ]  Electronic  [] Transcript (Please note that transcription charges may apply)	



<b>D.</b> [] []	<ul><li>[ ] Collection in person</li><li>[ ] By mail (Provide address where different / in addition to details provided above)</li><li>Town/city</li></ul>			
E. DECLARATION  Note any attempt to access personal data through misrepresentation may result in prosecution.  I certify that the information given in this application is true.				
Sign	gnature D	Pate		