

ANNEXURE A: PERSONAL INFORMATION REQUEST FORM

Please submit the completed form to the Information Officer:	
Name	
Contact Number	
Email Address	
	nay require you to provide proof of identification prior to processing your request.
there may also be a reaso	nable charge for providing copies of the information requested.
A. Particulars of Data S	Subject
Name & Surname	
Identity Number	
Physical Address	
Postal Address	
Contact Number	
Email Address	
B. Request	
I request the organisation	on to:
(a) Inform me whether it holds any of my personal information	
(b) Provide me with a record of 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:	