

ANNEXURE A:

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 for 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 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	