FORM DPG 2 (r. 9 (2))

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 as * 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)

MODE OF ACCESS

I would like to: (check all that 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 costs will apply) number of copies required: .....
- ☐ electronic
- ☐ transcript (Please note that transcription charges may apply)
- ☐ Other (specify) .....

C. DELIVERY METHOD

☐ Collection in person

☐ By mail (provide address where different / in addition to details provided above) Town/City: .....

☐ By e-mail (provide email address where different / in addition to details provided above): .....

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

Signature

Date