APPLICATION FORM TO REQUEST ACCESS TO A RECORD OF PERSONAL INFORMATION HELD BY THE COMPANY IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT, ACT NO 4 OF 2013 (AS AMENDED)

a) The particulars of the person who requests access to the record must be given below.

Α.	Particulars of	person rec	uesting	access	to the	record:

	lames and ty Numbe		ne:									_
Posta	l Address	:								· · · · · · · · · · · · · · · · · · ·		
Telep	hone Nun	nber:	()_				Fax	Number	·: () _			
Email	Address:							_				
Capa	city in whi	ch reque	est is ma	ade whe	en made	on beh	alf of ar	nother p	erson:			
	ulars of p		<u>n whose</u>	behalf	<u>request</u>	is made	<u>e:</u>					
	ection mus			pleted i			nformati		ade on I	pehalf o	f anothe	er
This se	ection mus	t ONLY		pleted i					ade on I	pehalf o	f anothe	er
This se	ection mus	t ONLY		pleted i					ade on I	pehalf o	f anothe	er -
This se person Identi	ection mus	r:		pleted i					ade on I	oehalf o	f anothe	er
This seperson Identi	ty Numbe	r: ecord: full deta	be com	e record	f a requ	est for in	nformati ss is req inue on	on is ma	rate pag	e/ anne	xure an	

2.	Reference Number/ Heading (if Ap	oplicable):		
3.	Any further particulars of record:			
	Signed at	_ this day	_ of	_ year
	SIGNATURE OF REQUESTER / I ON WHOSE BEHALF REQUEST		_	
	Applications can	only be subm	itted by email to nick@	olm.edu.za
FOR	INTERNAL USE			
Requ	est received from:			
Acting	g on Behalf of:			(if applicable)
Signa	ature of Information Officer of the Co	ompany		