



REQUEST FOR ACCESS TO RECORDS OF PRIVATE BODY
 (Section 53(1) of the Promotion of Access to Information Act 2 of 2000)
 Regulation 10

1. PARTICULARS OF PRIVATE BODY

*Tick one

To: The Information Officer			
Shonaquip Social Enterprise			
Shonaquip*	<input type="checkbox"/>	Uhambo Foundation*	<input type="checkbox"/>
Physical Address:		<input type="text"/>	
Telephone:		<input type="text"/>	
Email:		<input type="text"/>	

2. PARTICULARS OF PERSON REQUESTING ACCESS TO THE RECORD

2.1 The full particulars of the person who requests access to the record must be given below.

2.2 The address and/or fax number in the Republic to which the information is to be sent must be given.

2.3 Proof of the capacity in which the request is made, if applicable must be attached.

Full names and Surname: _____

Identity Number: _____

Postal Address: _____

Fax Number: _____

Telephone Number: _____

Email Address: _____

Capacity in which request is made

When made on behalf of another
Person: _____

3. PARTICULARS OF PERSON ON WHOSE BEHALF REQUEST IS MADE

This section must be completed ONLY if a request for information is made on behalf of another person.

Full Names and Surname: _____

Identity Number: _____

4. PARTICULARS OF RECORD

4.1 Provide full particulars of the record to which access is requested, including the reference number, if that is known to you, to enable the record to be located.

4.2 If the space is inadequate, please continue on a separate document and attach it to this form. The requester must sign all additional documents.

Description of Record or _____

Relevant part of the Record: _____

Reference Number: _____

Any further particulars of record _____

5. FEES

5.1 A request for access to a record, other than a record containing personal information about yourself, will be processed only after a request fee has been paid.

5.2 You will be notified of the amount required to be paid as the request fee.

5.3 The fee payable for access to a record depends on the form in which access is required and the reasonable time required to search for and prepare a record.

5.4 If you qualify for exemption of the payment, please state the reason for exemption.

Reason for exemption from payment of fees:

6. FORM OF ACCESS TO RECORD

If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1-4 below, state your disability and state in which form the record is required.

Disability: _____

Form in which record is required: _____

Mark the appropriate box with an "X"

Notes:

- a) Compliance with your request may depend on the form in which the record is available.
- b) Access in the form requested may be refused in certain circumstances. In such a case you will be informed if access will be granted in another form.
- c) The fee payable for access to the record, if any, will be determined partly by the form in which access is requested.

i. If the record is in written or printed form:

Copy of Record Inspection of record

ii. If the record consists of visual images:

iii. (this includes photographs, slides, video recordings, computer-generated images, sketches, etc.)

View the images Copy the images* Transcription of images*

iv. If the record consists of recorded words or information which can be reproduced in sound:

Listen Soundtrack to Transcription of soundtrack* of Link to soundtrack

v. If the record is held on a computer or in an electronic or machine-readable form:

Printed copy of record* Printed copy of information derived from the record* Soft copy of record

If you requested a written copy of the record (*), do you wish the copy to be posted to you?		
Postage is payable	YES	NO

7. PARTICULARS OF RIGHTS TO BE EXERCISED OR PROTECTED

If the provided space is inadequate, please continue on a separate page and attach it to this Form.
The Requester must sign all additional pages.

Indicate which right is to be exercised or protected: _____

Explain why the record requested is required for the exercise or protection of the abovementioned right:

8. NOTICE OF DECISION REGARDING REQUEST FOR ACCESS

You will be notified in writing whether your request has been approved or denied. If you wish to be informed in another manner, please specify the manner and provide the necessary particulars to enable compliance to your request.

How would you prefer to be informed of the decision regarding your request to access the record?

Signed at _____ this _____ day of _____ 20 _____

Signature of requester or person on whose behalf request is made