REQUEST FOR ACCESS TO RECORD OF PUBLIC BODY
(Section 18(1) of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000))
[Regulation 6]

A. Particulars of Public Body

Information Officer/Deputy Information Officer: Gauteng Department of Education

B. Particulars of person requesting access to the record

(a) The particulars of person requesting access to the record must be recorded below.
(b) Furnish an address and/or fax number in the Republic to which information must be sent.
(c) Proof of the capacity in which the request is made, if applicable, must be attached.

Full names:  
Surname:  
Identity number:  
Postal address:  

Phone number:  
Fax number:  
Cell number:  
Email address:  

Capacity in which request is made, when made on behalf of another person:
C. Particulars of person on whose behalf request is made

<table>
<thead>
<tr>
<th>This section must be completed only if request for information is made on behalf of another person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full names:</td>
</tr>
<tr>
<td>Surnames:</td>
</tr>
<tr>
<td>Identity/company number:</td>
</tr>
</tbody>
</table>

D. Particulars of record

(a) 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.
(b) If the provided space is inadequate please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.

<table>
<thead>
<tr>
<th>Description of record or relevant part of the record:</th>
</tr>
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<table>
<thead>
<tr>
<th>Reference number, if available:</th>
</tr>
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<table>
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<tr>
<th>Any further particulars of record:</th>
</tr>
</thead>
</table>

E. Fees

(a) A request for access to a record, other than record containing personal information about yourself, will be possessed only after a request fee has been paid.
(b) You will be notified of the amount required to be paid as the request fee.
(c) 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.
(d) If you qualify for exemption of the payment of any fee, please state the reason therefore.

Reason for exemption from payment of fees:

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F. Form of access to record

Mark the appropriate box with an “X”
(a) Your indication as the required form of access depends 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 to the record, if any, will be determined partly by the form in which access is requested.
If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1 to 4 hereunder, state your disability and indicate in which form the record is required.

**Disability:**

Form in which record is required:

1. If the record is in written or printed form:
   - [ ] Copy of record*
   - [ ] Inspection of record

2. If record consists of visual images:
   - *(This includes photos, slides, video recordings, computer-generated images, sketches, etc.)*
     - View the images
     - Copy of the image
     - Transcription of the images

3. If record consists of record words or information which can be reproduced in sound:
   - Listen to the soundtrack (Audio Cassette)
   - Transcription of the soundtrack*

4. If record is held on computer or in an electronic or machine-readable form:
   - Printed copy of record*
   - Printed copy of information derived from the record*
   - Copy in computer readable form* (stiffy or compact disc)

*If you requested a copy or transcript of a record above, do you wish the copy or transcript to be posted to you? A postal fee is payable.

- [ ] Yes
- [ ] No

*Note that if the record is not available in the language you prefer, access may be granted in the language in which the record is available.*

In which language would you prefer the record?
G. Notice of decision regarding request for access

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

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

Signed at____________________ this______ day of ________________ 20 _______

________________________
SIGNATURE OF REQUESTER/PERSON ON WHOSE BEHALF REQUEST IS MADE