

FORM A
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 2]

FOR DEPARTMENTAL USE

Reference number: _____

Request received

by: _____

(state rank, name and surname of information officer/deputy information officer) on
_____ (date) at _____ (place).

Request fee (if any): R _____

Deposit fee (if any): R _____

Access fee: R _____

SIGNATURE OF INFORMATION
OFFICER/DEPUTY
INFORMATION OFFICER

A. Particulars of public body

The Information Officer/Deputy Information Officer: Ms Zintle Filtane
University of Fort Hare
Alice Campus
Ring Road, Alice

5700

Telephone: 27406022011
Fax: 27406022577
Email: registrar@ufh.ac.za

B. Particulars of person requesting access to the record

- *The particulars of the person who requests access to the record must be recorded below.*
- *Furnish an address and/or fax number in the Republic to which information must be sent*
- *Proof of the capacity in which the request is made, if applicable, must be attached.*

Full names and surname: South African History Archive (SAHA)
Identity/Passport number: Non-Profit Trust No. 2522/93
Postal address: P.O.Box 31719, Braamfontein, 2017
Fax number: +27866491491
Telephone number: +27117182563
E-Mail Address: foip@saha.org.za

Capacity in which request is made, when made on behalf of another person:

C. 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:

D. Particulars of record

- *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.*
- *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.***

- Description of record or relevant part of the record:

Copies of any and all support service policies in use by the University to foster a conducive, accessible, inclusive and integrated learning environment for students living with disabilities, including but not limited to:

- i. a list of measures put into place to facilitate accessible mobility around the campus and inclusive learning campus grounds;
- ii. a list of measures put into place to ensure accessible teaching and learning resources for persons living with disabilities; and
- iii. a list of persons designated to establish and implement any of these measures.
 - o Reference number, if available:
 - o Any further particulars of record:

E. Fees

- *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.*
- *You will be notified of the amount required to be paid as the request fee.*
- *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.*
- *If you qualify for exemption of the payment of any fee, please state the reason for exemption.*

Reason for exemption from payment of fees:

F. 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 to 4 hereunder, state your disability and indicate in which form the record is required.

Disability: _____

Form in which record is required: _____

Mark the appropriate box with an "X".
NOTES:

- *Your indication as to the required form of access depends on the form in which the record is available.*
- *Access in the form requested may be refused in certain circumstances. In such a*

<i>case you will be informed if access will be granted in another form.</i>						
(c) <i>The fee payable for access to the record, if any, will be determined partly by the form in which access is requested.</i>						
1. If the record is in printed form:						
X	Copy of record*		Inspection of record			
2. If record consists of visual images: (this includes photographs, slides, video recordings, computer-generated images, sketches, etc).						
	view the images	X	copy of the images*		transcription of the images*	
3. If record consists of recorded words or information which can be reproduced in sound:						
	Listen to the soundtrack (audio cassette)	X	transcription of soundtrack* (written or printed document)			
4. If record is held on computer or in an electronic or machine ? readable form:						
	Printed copy of record*	X	Printed copy derived from the record*		copy in computer readable form*(stiffy or compact disc)	
* If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you?					YES	NO
A postal fee is payable.						X
<i>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.</i>						
In which language would you prefer the record? ENGLISH						

- G. Notice of decision regarding request for access**

You will be notified in writing whether 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.
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How would you prefer to be informed of the decision regarding your request for access to the record?

IN WRITING via email to foip@saha.org.za

Signed at this 12th of March 2018.

A handwritten signature in black ink, appearing to read 'N. Khumalo'. The signature is written in a cursive style with a large initial 'N' and a circular flourish at the end.

SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS
MADE

Ms Nonhlanhla Khumalo (FOIP Intern)

South African History Archive (SAHA)