

REQUEST FOR ACCESS TO INFORMATION

PART APARTICULARS OF INFORMATION HOLDER
Name of the institution/ information holder
Address of the institution/ information holder
Location (District/Town/City/TA/Village
PART BPARTICULARS OF INFORMATION SEEKER
Full Name:
Date of birth
National ID Number
Postal address.
Physical address.
Telephone number.
Email address.
PART C_PARTICULARS OF PERSON ON WHOSE BEHALF THE REQUEST IS MADE (To
be completed if request is being made on behalf of another person)
that indicates that you are authorized to act for the other person)Particulars of person on whose behalf the request is made (Please attach any documentation
Name:
Address:

	h January, 2021 ntity Number:
	PART D_PARTICULARS OF INFORMATION BEING SOUGHT
	vide details about the nature of information being sought and justification.
	lude relevant details that can help in retrieving the information, such as source, author
dat	e of publication, etc.
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Exp	plain the purpose for which you seek this information and why it is important that the
Info	ormation should be provided to you.
	PART EFORMAT OF INFORMATION BEING REQUESTED
	te the format in which you want to access the information, e.g. print, electronic etc.
1.	Normal print version ()
2.	Braille print version ()
3.	Other (state other preferred format)
	Signed atthis day of
	Signature of the information
	seeker