MANUAL

in terms of Section 51 of the Promotion of Access to Information Act, (PAIA), 2000 (Act No 2 of 2000)

7 February 2003
8 April 2008 (Revised)
SA Human Rights Commission (SAHRC) Guide on the use of the Act in terms of section 10 of PAIA

Section 10 of PAIA came into operation on 15 February 2002. In terms of section 20 of the Act, the SAHRC must compile a Guide within 18 months of the date that the Act came into effect. According to the SAHRC website (www.sahrc.org.za) this Guide will be completed not later than August 2003.

The contact details of the SAHRC are:
Postal address:
Private Bag 2700
Houghton
2041

Physical address:
Boundary Road
Isle of Houghton
Wilds View
Entrance 1
Houghton

Process

Requests must be submitted on Form B prescribed in terms of regulation 4 of the Regulations issued in terms of PAIA on 9 March 2001. A copy of this form is attached hereto.

Please send your request for the attention of the Information Officer at the contact address given above.

Fees

The Fees prescribed in terms of regulation 5 of the Regulations issued in terms of PAIA on 9 March 2001 are as follows:

1. Fees payable by requesters (excluding personal requesters)  R 50,00
2. The fee for reproduction is as follows:

(a) For every photocopy of an A4-size page or part thereof  1,10
(b) For every printed copy of an A4-size page or part thereof held on computer or in electronic or machine-readable form  0,75
(c) For a copy in computer-readable form on
   (i) stiffy-disc  7,50
   (ii) compact disc  70,00
(d) (i) For a transcription of visual images for an A4-size page or part thereof  40,00
   (ii) For a copy of visual images  60,00
(e) (i) For a transcription of an audio record, for an A4-size page or part thereof  20,00
   (ii) For a copy of an audio record  30,00

3. The actual postage fee must be paid when a record must be posted to a requester.
Records kept in terms of other legislation

Records are kept in terms of the following legislation:

- Income Tax Act
- Unemployment Insurance Act
- Skills Development Levies Act
- Basic Conditions of Employment Act
- Labour Relations Act
- Value Added Tax Act

Access to Records

SAIFM's websites www.saifm.co.za and www.virtualexamcentre.co.za contains the following information:

- strategic objectives
- Board of Governors
- products and services
- contact details
- access to events

Access to the websites is available to the public.

The following information of a confidential nature is kept by SAIFM:

- Employee information including conditions of employment.
- Student information including personal details and examination results.
- Contracts, accounting information, technical specifications of Internet examination platform.
- Membership information
- Technical product information.

Manual

This manual is available from www.saifm.co.za, alternatively from the offices of SAIFM or SA Human Rights Commission. See contact details above.
FORM B

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY
(s 53(1) of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000)

[Regulation 4]

A. Particulars of Private Body

The Head:

B. Particulars of person requesting access to the record

(a) The particulars of the person who requests 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 and surname: ____________________________________________

Identity Number: ___________________________________________________

Postal address: _______________________________________________________

____________________________________ Fax No: __________________________

Tel No: ___________________ E-mail: _________________________________

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

(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 additional folios.**

1. Description of record or relevant part of the record: ____________________________
   _________________________________________________________________________
   _________________________________________________________________________
   _________________________________________________________________________

2. Reference number, if available: ___________________________________________

3. Any further particulars of record: __________________________________________
   _________________________________________________________________________
   _________________________________________________________________________

E. Fees

(a) 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.
(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 to search for and prepare a record.
(d) If you qualify for exemption of the payment of any fee, please state the reason therefor.

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:
(a) Your indication as to 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 for access to the record, if any, will be determined partly by the form in which access is requested.

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 photographs, slides, video recordings, computer-generated images, sketches, etc)
   - view the image
   - copy of the images*
   - transcription of the images

3. If record consist of recorded words or information which can be reproduced in sound-
   - listen to the soundtrack (audio cassette)
   - Transcription of the soundtrack (written or printed document)

4. If the record is held on computer or in an electronic machine-readable form-
   - printed copy of record*
   - printed copy of information derived form 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 to be posted to you?
A postal fee is payable
   - YES
   - NO

G. Particulars of right to be exercised or protected

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

1. Indicate which right is to be exercised or protected:
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________

2. Explain why the requested record is required for the exercising or protection of the aforementioned right:
   _______________________________________________________________
   _______________________________________________________________
   _______________________________________________________________
H. 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.

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

Signed at _________________ this_____ day of _________________ 20____

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