SOUTH AFRICAN QUALIFICATIONS AUTHORITY (SAQA)

REQUEST FOR AN EXTRACT FROM THE NATIONAL LEARNERS' RECORDS DATABASE (NLRD)

I hereby request and give consent for an extract of my achievements recorded on the NLRD to be sent to the email address indicated below.

Sur	<u>nam</u>	e						_																						
Pre	/iou	s su	rnam	ne (if	арр	lical	ole)						,	•											•					
				Ì																										
Nan	nes		•										•																	
Nan	nes ((con	tinue	ed)				1						1																
lder	tific	atio	n nu	mbe	r							1		1																
			1																											
	1	Į	ı		1		1		1					1																
<u>Ema</u>	il a	ddre	ss											•																
Con	tact	nur	nber	1	1		ı	1	1			1			1			ı			ı		ı	ı		1	1		1	ı
IЧ	0 0	lar	e th	at	Lar	n t	hΔ	ah	· • • • • • • • • • • • • • • • • • • •	۵m	Δn	tio	200	l in	div	idu	ا د	and	4 tk	nat	the	ı in	for	ms	atio	n r	חחם	امد	toc	4
			erso													luu	iai i	anc	a u	iai	uic	<i>-</i> 111	1101	1116	atio		БЧ) C		
C :-	ın oʻt																								Date			_		
આઉ	ınatı	ure																							υaτe	!				

Please note:

- This form must be completed, signed and e-mailed to <u>verifications@saqa.org.za</u> in order for the request to be processed.
- The requester must attach a <u>copy</u>, of his/her ID to this form.