

FORM 7

[Regulation 17(1)]

APPLICATION FOR CERTIFICATE BY PERSON IN RESPECT OF OWN PARTICULARS

Section 44 of the Criminal Law (Sexual Offences and Related Matters)
Amendment Act, 2007 (Act No. 32 of 2007)(the Act)

NOTE 1: In terms of section 44 of the Act an application for a certificate, stating whether or not the particulars of a person mentioned in the application are recorded in the National Register for Sex Offenders may be made by—

an employer in respect of an employee;

SIGNATURE OF APPLICANT (If application is not submitted electronically)

| (e) a person contemplated approf vulnerable persons in res, (f) a person contemplated in se, her own particulars; or any person whose particular | ct of an ap in respect lying for a pect of his ection 48(2 rs appear o | plicant; of his or her own particulars; licence or approval to manage or operate any or her own particulars; | care-giver, | iness concern or trade in relation to the supervision over or car temporary safe care-giver or adoptive parent in respect of his o d from any police station) | |
|--|---|---|-------------|---|--|
| 1. PARTICULARS OF APPL | ICANT | | | | |
| Title: | | | | | |
| Full names and surname: | | | | | |
| Indicate any other surnames: | | | | | |
| Indicate any known alias or nickname: | | | | | |
| Profession or trade: | | | | | |
| Date of birth: | | | | | |
| Age: | | | | | |
| Identity number/ passport number: | | | | | |
| Driver's licence number: | | | | | |
| Home address/ Last known physical address: | | | | | |
| Any other contact details (including postal address): | | | | | |
| Telephone number: | | Cell number: | | E-mail address: | |
| Type of sexual offence: | | | | | |
| Date and place of conviction: | Date: | Date: | | Place: | |
| Date and place of sentence: | Date: | Date: | | Place: | |
| Sentence imposed: | | | | | |
| Reason for applying for certificate: | | | | | |