

INTERNAL COVERING LETTER : ROUTE/INSTRUCTIONS

HANDLING OF REQUESTS DIRECTED IN TERMS OF THE PROMOTION OF ACCESS TO INFORMATION, ACT 2000 (ACT 2 OF 2000)

REQUESTER'S NAME		FILE NO.	REQUEST NO.
INFORMATION OFFICER (HEAD OF INSTITUTION)		DATE RECEIVED (FORM A)	
NAME OF RESPONSIBLE PERSON (DIO)			

INSTRUCTIONS FOR THE SEARCH OF RECORD(S), GIVING COMMENTS AND/OR RECOMMENDATIONS WITH A VIEW TO DECISION-MAKING BY THE INFORMATION OFFICER

ACTION REQUESTED	INSTRUCTION BY	NATURE OF INSTRUCTION, COMMENTS AND/OR RECOMMENDATIONS	ASSIGNED TO	D-DATE AND REFER TO
1. Please complete attached search instruction.				
2.				
3.				
4.				
*COMMENTS/ RECOMMENDATIONS FROM RESPONSIBLE PERSON (DIO)				
	----- SIGNATURE OF DEPUTY PRINCIPAL (DIO)			
DATE RETURNED TO REQUEST OFFICER	DATE REFERRED TO INFORMATION OFFICER	DECISION OF INFORMATION OFFICER		
		----- SIGNATURE (IO)		

* Please use extra A4-pages if this space is inadequate.