

Request to change, update or delete personal Information:

Nursetec

- * *Please note that your details needs to be filled out in Section A, in order for the Company the bring about requested changes
- ** Please indicate in Section B, what Personal information you would like to change/update/delete

Section A:				
First Names:		Surname:		
ID Number:		Nursetec Number:		
Section B: I would like to change, or update, the fo	ollowing			
Name	Surna	ame	Qualification	
	* Proof o	f change	* Proof of change	
Residential Address	Residential Address		Banking Details (Bank, Acc. Number, Acc. Type, Acc. Holder)	
Details for changes, as indicated above	:			
**Please note that by requesting individual profile, as deletion of individual groupin Reason for deletion request: ** Please note that Company Profile will Company to perform this action	gs will cause a brea	kdown in successfu	Illy operating the employees profile.	
I hereby request above changes be imp	elemented, effective	e from: /	/	
I hereby certify that all details, as provi	ided above, is accur	ate and up to date	, and that the Company may retain	
this Information on my profile:				
I hereby certify deletion of my Compan	y Profile:			
Name and Surname:			Signature:	
Policies and Procedures: POPIA Policy	- Internal Personne	el		

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