



Access Information

Obtaining Documents related to the request (Fees)

Data of the Authority the Application Is Submitted to: **Data of The Applicant**

The Entity:
Sector:
Division;

Name:
Civil I.D. No.:
Title:
Phone No.:
E-mail:

Statements of information or required documents
1
2
3
4
5

The Reason for Request
1
2
3
4

Supporting Documents
1
2
3
4

The Relation of the Applicant to the Information or Documents
1
2
3
4

Acknowledgment by the applicant

I acknowledge my responsibility for the information I request: Access Obtaining Document

And in the event that my request is accepted I pledge not to use the information that I have seen or the documents that I have obtained, except in the cases legally determined without any liability on the administration.

The applicant: **Signature:** **Date:**
Data to Be Filled by the Division
Employee's Information **Application's Data**
Name: _____ Application No
Job: _____ Application Date
Division:
E-mail:

The result of examining the application after presenting to the head of Division or Authorized Person

The information is viewed Obtaining of Related Documents Request is Rejected Because:
 Segmentation of the Application:

1-
2-
3-
Concerned Employee

Head of Division/Authorized Approval