ARISE Data Request Form

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| Full Name: |  |
| Institution/Organization: |  |
| Email Address: |  |
| Phone Number: |  |
| Are you a Student or an Employee? (Please select one): |  |
| Reason for Data Request: (Provide a brief explanation): |  |
| Who referred you to this data? |  |
| Supervisor's Name: |  |
| Project or Study Title: |  |
| Co-Supervisor's Name (if applicable): |  |
| Do you understand the Protection of Personal Information Act (POPIA)? (Yes/No): |  |
| Which Data are you requesting? (Specify DASH or Nutrient): |  |
| How long will you be using the data for? |  |

## Disclaimer:

By submitting this data request, you agree to the following terms and conditions:  
- You will not share the data with any third party or unauthorized person without the prior written consent of the ARISE Team.  
- You understand and comply with the protection of personal data laws (e.g., POPIA).  
- You will use the data solely for the research or project purposes specified in this form.

## Please email the completed form to:

NgcoboN42@ukzn.ac.za

CC: Machanyangwa@ukzn.ac.za, NcayiyanaJ@ukzn.ac.za, Nzimanden@ukzn.ac.za

If you require assistance, you can contact us at 081 331 4300.