

ANNEXURE F**REGISTER RELATING TO APPLICATIONS FOR A
COMPULSORY HIV TEST**

The following information relating to every application for an HIV test must be recorded:

- (a) The CAS/ICDMS number;
- (b) The date of the application;
- (c) the full names, date of birth, identity number, address and contact details of the victim;
- (d) if the application is brought by an interested person on behalf of the victim, the full names, date of birth, identity number, address and contact details of that interested person and the relationship between the victim and the interested person;
- (e) the full names, date of birth, identity number, address and contact details of the alleged offender;
- (f) full particulars of the alleged sexual offence;
- (g) the date the order for HIV testing was made;
- (h) whether the application was granted or dismissed by the magistrate;
- (i) whether a warrant of arrest was issued;
- (j) the magistrate's court and particulars of the magistrate who considered the application;
- (k) if the application was granted, the date on which, and name of the health establishment where the order was executed; and
- (l) where the sealed record is kept of the test results in cases applied for by an investigating official.