

ANNEXURE A

43 Pat Palmer Owen Drive  
Mabelreign, Cotswold Hills  
Harare  
**ZIMBABWE**

16 March 2002

The Managing Director  
The Avenues Clinic  
P.O. Box 4880, Harare  
**ZIMBABWE**

Dear Mr Deda

RE **MASTERS DISSERTATION: IN PATIENTS' PERCEPTION OF NURSING CARE  
RECEIVED AT THE AVENUES CLINIC: A DESCRIPTIVE STUDY**

I am required to carry out a research as partial fulfillment of the masters programme that I am currently studying with the University of South Africa.

The university has approved the above topic which I submitted to them as my choice for the programme. Please find enclosed a copy of the letter of approval of topic from the university.

Would you therefore please grant me permission to carry out the research in the general wards of the Avenues Clinic?

I wait to hear from you at your earliest convenience.

Yours sincerely

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**ELIZABETH SIBOTSHIWE (MRS)**  
STUDENT NUMBER 3166-155-6