

Access to Information Request Form

Local Authority Freedom of Information and Protection of Privacy Form A [Clause 6(1)(a)]

Personal information on this form is collected under *The Local Authority Freedom of Information and Protection of Privacy Act* and will be used or disclosed only as necessary to respond to your request.

INFORMATION ABOUT YOU (please print)

Last Name		Company or Organization (if Applicable)
First Name		Day Telephone Number
Address		Alternate Number
City	Province	Postal Code
INFORMATION ABOUT THE RECORDS YOU ARE REQUESTING		
Are you requesting: Your own personal information Personal information about someone other than yourself		
(Attach proof that you have authority to receive the information requested) Name of Student(s) (List additional students in space below if needed)		
	Date of Birth	
First Name	Schools Attended and years	
2. Last Name	Date of Birth	
First Name	Schools Attended and years	
What is the time period for the records you are requesting (if applicable)?		
Processing Fee The person managing your request may contact you to seek clarification or to discuss aspects of the request, including the application of additional fees if necessary. There may be a \$20.00 application fee which includes one hour of research time. If your request is more complicated, processing fees of \$15.00 per half hour after the first hour will be charged. A written cost estimate will be provided in advance if the costs are expected to exceed \$50.00. No action will be taken without your authorization to proceed. You may request a waiver of the processing fee or additional fees, but may be required to provide evidence of substantial financial hardship (see section 8 of the regulations).		
Check if requesting waiver of processing fees (list reason for waiver below)		
How long will it take to get the requested Information? Every effort is made to supply the requested information as quickly as possible. However in some cases the records are not easily retrievable or discussions have to be held with other parties. Within 30 days you will hear back from us, either: -Providing the requested information; -Advising that the information will not be released and for what reason; or -Advising that due to extenuating circumstances it will take a further period of time, not to exceed 30 days, to respond to		
the request.		
For Office Use Only		Cignature of Applicant
Fee is to be waived for request		Signature of Applicant
Date Application received		
Completed by		Dete
		Date