

Request to Access Information

About you

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	Last Name		First Name	
Name of company or organization (if applicable)				
Mailing Address				
City or Town		Province		Postal Code
Phone		Email		

About your Request

What kind of information are you requesting access to?

☐ General information (please attach the initial fee of \$25)

☐ Personal information (no initial fee is required)

Do you want to:

☐ receive a copy of the record?

☐ examine the record?

About the Information you want to Access

What records do you want to access? Please give as much detail as possible. If you want Information access to your personal information, be sure to give all your previous names. For another person's information, you must attach proof that you can legally act for that person. If you need more space, please attach a separate sheet of paper.

What is the time period of the records? Please give specific dates.

Your Signature

Signature	Date
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Please forward your request to: Access and Privacy Office, AD111, 2500 University Drive NW, Calgary, AB T2N 1N4, OR by email to accessandprivacy@ucalgary.ca, OR by fax to (403) 210-9635.

FOR OFFICE USE ONLY	
Date Received	Request No.

The personal information collected through this Request to Access Information form is collected under the authority of section 4(c) of the Alberta *Protection of Privacy Act* (POPA). It will be used for the purpose of assessing and processing your request and may also be used for program evaluation and improvement purposes. For questions about this form or the collection, use or disclosure of your personal information, please contact the University of Calgary Access and Privacy Office at accessandprivacy@ucalgary.ca.

How to Complete this Form

You can access many public body records without making a request under the FOIP Act. To determine whether you need to make a request under the Act or if you need help completing the form, contact the FOIP Coordinator.

About you

Check the title by which you prefer to be addressed and enter your last name and first name. Then enter the name of the company or organization that you are representing, if applicable. Enter your complete mailing address and your home and cell phone numbers. The University may need to contact you if there are any questions about your request. If you have a fax number or email address where correspondence can be sent, enter them in the spaces provided.

About your Request

What kind of information are you requesting? Indicate whether you are requesting general or personal information.

General information: If you are making a request for general information, there will be an initial fee of \$25. You will be provided with an estimate of how much your request will cost before processing begins. If the total cost of processing your request is more than \$150, you will be asked to pay a 50% deposit. The records are provided when the fee is paid in full.

Personal information: If you are requesting records containing your personal information you will have to provide proof of your identity before the records are released to you. If you are requesting records for another person, you will have to provide proof that you have the authority to act for that person. For example, you might provide proof that you are the person's guardian or trustee or that you have power of attorney for the person. There is no fee for accessing personal information unless the cost of producing copies is more than \$10. In these cases, you will be notified of the fee.

If you are making a continuing request (the same request processed repeatedly at pre-determined time intervals over a period of up to 2 years), you should contact the FOIP Coordinator. The initial fee is \$50 and you must pay any additional costs as the information becomes available.

Do you want to either receive a copy of the record or examine the record? Check the appropriate box.

About the Information you want to Access

What information are you requesting? Please be as specific as possible in describing the records. The more specific your request, the quicker and more accurately it can be answered. If you need more space, please continue your description on a separate sheet of paper and attach it to this request form.

If you are requesting your own personal information, please be sure that you give:

- Your full name;
- Any other names that you have previously used; and
- Any identifying number that relates to the records, such as your employee or student number, case number or other identification number.

If you are requesting another person's information, please give:

- The person's full name;
- Any other name that person may have used on the records; and
- Any identifying numbers for the person, such as employee or student number, if you know them.

If you are requesting records for another person, you will have to provide proof that you have the authority to act for that person.

Enter the time period of the requested records. For example, if you are requesting records for the period January 1, 1993 to August 31, 1994, enter those dates in the space provided. If you want records from August 1996 to the present, enter 'August 1996 to present'.

Your Signature

Sign and date the form and send it to the FOIP Coordinator.