



Personal information is collected under Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act* and will be used to respond to your request. It is also protected by the privacy provisions of the *FOIP Act*. To determine if you need to make a request under the *Act* or if you have questions contact the FOIP Coordinator at 780-464-8219.

Name _____

Organization or company (if applicable) _____

Address _____
Street address City/town Province Postal code

Daytime phone number _____ Fax number _____

E-mail _____

Do you want to receive a copy of the record or examine the record

What records do you want to access? (Please provide as much detail as possible. Feel free to use additional paper.)

What is the time period of the records? (include specific dates)

Signature date

Fees The initial fee is \$25. For a general request an estimated cost will be provided before processing begins. If the total cost is more than \$150, you will be asked to pay a 50% deposit. Records are provided when the fee is paid in full.

Office use only

Date request received _____ Date fees received _____ Request number _____

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Name (in full) _____

Address _____
Street address City/town Province Postal code

Daytime phone number _____

This request is about myself or about someone to whom I have authority to act for
(Guardianship, trustee order, power of attorney)

Name (in full) same as above or _____
(If different from above)

Previous used names _____

Any identifying number that relates to the records (e.g. employee number, case number) _____

Do you want to receive a copy of the record or examine the record

What records do you want to access? (Please provide as much detail as possible. Feel free to use additional paper.)

What is the time period of the records? (include specific dates)

Signature date

Fees There is no initial fee for accessing your own personal information. If the cost of photocopying is more than \$10, you will be notified of the fee.

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Date request received _____ Date fees received _____ Request number _____

Date records released _____ Proof of identity/authority to act verified