

# **Request to Correct Personal Information**

Personal information on this form is collected under Alberta's *Freedom of Information and Protection of Privacy Act* and will be used to respond to your request. Instructions for completing this form are on the back.

About you	☐ Mr. ☐ Ms ☐ Dr. Last name First name ☐ Mrs. ☐ Miss			st name
	Name of company or organization (if applicable)			
	Mailing address			
	City or town		Province	Postal code
	Telephone (daytime)	Telephone (evening)	Fax number	E-mail address
	,	,	/	
About your request	<ul><li>1. Whose information do you want to correct?</li><li>Your own personal information</li></ul>			
request	Another person's information (Please attach proof that you can legally act for the person.)			
	2. To which public body are you making your request? (Please fill in the name of the organization.)			
About the	What personal informatio	in needs to be corrected? F	lease dive as much detail as	s nossible (Be sure to give the
information you want to correct	<ol> <li>What personal information needs to be corrected? Please give as much detail as possible. (Be sure to give the complete name that is in the records if it is different from the name given above. If you need more space, please attach a separate sheet of paper.)</li> </ol>			
	2. What correction do you want to make and why? (Please attach any documents that support your request.)			
Your signature	Signature			Date
	For FOIP office use only:	Request number		
	Date received	Request number		
MPD/IIINE 4000				

## How to complete the form

You can correct information in 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 of the organization to whom you are making the request.

### **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 daytime and evening telephone numbers. The public body may need to contact you if they have any questions about your request. If you have a fax number or E-mail address where correspondence can be sent, enter them in the spaces provided.

### **About your request**

1. Whose information do you want to correct? Indicate whether you want your personal information or another person's information to be corrected.

**Your personal information:** If you want your records to be corrected, you will have to provide proof of your identity.

Another person's information: If you want the records of another person to be corrected, 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.

2. Enter the name of the public body that you believe has the records that you want to correct.

### About the information you want to correct

 What records contain the information that you want corrected? 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 want a correction made to your own personal information, please be sure that you give:

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

If you want a correction made to 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 if you know them.
- 2. What corrections do you want made? What is incorrect about the information that is currently on the record? Please be specific.

### Your signature

Sign and date the application and send it to the FOIP Coordinator of the appropriate organization. If you are not sure of where to send the form, please consult the *Alberta Directory of Records*.