ACCESS OR CORRECTION REQUEST

☐ Access to general records (non-personal information)

A. Type of Request



Freedom of Information and Protection of Privacy Act

| ☐ Access to own pe | ersonal information personal information b | ay authorized party | | | | |
|------------------------------------|---|------------------------|-----------------|---|--------------------|-------------------------------|
| | n personal information | by authorized party | | | | |
| B. Requester's | Information | | | | | |
| Last name | | First name | | | | Middle initial |
| Linit/Ant no | Ctus at Address | | | | I DO have | |
| Unit/Apt. no | Street Address | | | | PO box | |
| City Town | | Province | | | Postal Code | |
| Home phone no. (include area code) | | | Busines | Business/mobile phone no. (include area code & extension) | | |
| | | | | | | |
| | | | | | | |
| Time period of the | | | | Method of Access | | |
| From (yyyy/mm/dd |) | To (yyyy/mm//dd) | | ☐ Receive copy ☐ Examine original (on site only) | | |
| D. Payment an | d Signature | | | | | |
| \$5 application fee | | Signature | | | Date (yyyy/mm/dd/) | |
| □ Cheque □Cash (in person only) | | | | | | |
| Personal information | contained on this form | is collected under the | Freedom of Info | ormation and Protection of Priva | acy Act and will | be used to answer your reques |
| | | | | nformation Analyst at the Onta | - | |
| E. Institution U | lse Only | | | | | |
| Date received (yyy | | Request no. Comments | | | | |

This form will be kept for 6 years from the date of completion. Disponible en français.

Instructions for Completing Access or Correction Request

Informal Access to Records

Many records of public institutions are available to you without making a request under the *Freedom of Information and Protection of Privacy Act*. Contact the Chief of Staff at the Ontario Trillium Foundation to determine whether you need to make a formal request.

A. Type of Request

Check the box that indicates what you are requesting. (Records that do not contain personal information are general records.)

OTF is required to verify your identity before giving you access to your own personal information.

If you are requesting another person's personal information records, you must provide proof that you have the authority to act for them (e.g., power of attorney, guardian or trusteeship order).

B. Requester's Information

Please ensure you have entered your name, address and telephone numbers accurately.

C. Description of Records or Correction Requested

Provide as much detail as possible about the requested general records, own personal information, other's personal information or correction of own personal information. Use a separate sheet of paper if you need more space and attach it to this form.

If you are requesting personal information records, provide the name that should appear on them.

Specify the time period for the records as precisely as possible, e.g., from 2008/07/21 to 2009/11/30.

If you are requesting a correction of your own personal information records, describe the correction you want and provide any supporting documents. If possible, provide copies of the information to be corrected and the information you wish to have it replaced with.

Check a box to indicate whether you want to examine original documents (which may only be done on site) or receive copies.

D. Payment and Signature

A \$5 application fee is required. Cash payments must be made in person.

Make cheques payable to the Ontario Trillium Foundation.

Sign and date the form and mail it or submit it in person to the institution that holds the records.