

REQUEST FORM

Please Note: a \$5.00 CAD application fee is required to process all requests (cheque or money order, payable to SHERIDAN COLLEGE).

Complete this form:

Request for (check one only):		Name of Sheridan office to which you are making your request:	
Access to General Records		Information and Privacy Office	
Access to own Personal Information		Other, please specify:	
Correction of own Personal Information			
Last name:			
First name:		Middle name:	
Street address, apartment:			
City, town:		Province:	Postal code:
Email (optional):		Tel. no. (day):	Tel. no. (evening):
If request is for access to, or correction of, own personal information records:			
Last name appearing on records <input type="checkbox"/> same as above, or (specify):			

Please give a detailed description of requested records, personal information or personal information to be corrected.

NOTE 1: if you are requesting access to or correction of your own personal information, please identify the personal information bank or record containing the personal information, if known. **NOTE 2:** if you are requesting a correction of personal information, please state the desired correction and, if appropriate, attach any supporting documentation. You will be notified if the correction is not made and you may require that a statement of disagreement be attached to your personal information.

Preferred method of access to records:	<input type="checkbox"/> examine original <input type="checkbox"/> receive copy	Signature:	Date:
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FOR SHERIDAN USE ONLY

Received by Office:

Date Received:

Request Number:

Comments:

NOTE: Pursuant to *Freedom of Information and Protection of Privacy Act*, fees will be charged for activities which are required to process your request. Some examples are:

- > a search charge for every 15 minutes of manual search required to locate a record
- > costs incurred in locating, retrieving, processing or copying a record, or in preparing the record for disclosure
- > postage and shipping costs where applicable

For more information, please go to: http://www.e-laws.gov.on.ca/html/regs/english/elaws_regs_900460_e.htm.

Print and sign the form, then mail it to:

Office of General Counsel
The Sheridan College Institute of Technology and Advanced Learning
1430 Trafalgar Road
Oakville, ON, L6H 2L1

Privacy: Personal information in connection with this form is collected under the authority of the *Ontario Colleges of Applied Arts and Technology Act, 2002* and will be used for the purpose of responding to your request. If you have any questions about the collection, use and disclosure of personal information by Sheridan, please contact: The Office of General Counsel, The Sheridan College Institute of Technology and Advanced Learning, 1430 Trafalgar Road, Oakville, ON, L6H 2L1 Tel: 905-814-4005, email: privacy@sheridancollege.ca