

FIPPA REQUEST FORM



This form is to be used for submitting a formal request for information to Carleton University under the *Freedom of Ontario and Protection of Privacy Act*. Please complete the entire form, including the signature and date fields.

Type of Request

Access to General Records
Access to Personal Information
Correction of Personal Information

Offices/Units/Individuals Holding Records

First and Last Name

Street Number and Name (e.g. 1125 Colonel By Drive)

Apartment, Room, Suite

City, Province/State, Country (If outside of Canada or United States)

Postal or ZIP Code

Phone Number

E-mail Address

Request Text

Please provide enough detail in your request to allow an experienced faculty or staff member to conduct the search. Your request should include the name or topic of records being sought, date ranges and document types (e.g. e-mails, presentations, Excel spreadsheets, etc).

Preferred Method of Access

Examine Original
Receive Paper Copy
Receive Electronic Copy

SIGNATURE

DATE

Personal information collected through this form will be used and disclosed by Carleton University under the authority of the *Carleton University Act* and in accordance with sections 39, 41 and 42 of Ontario's *Freedom of Information and Protection of Privacy Act*. The purpose is to manage and process your formal FIPPA request. If you have any questions about the processing of personal information by Carleton University, please contact the Manager, Privacy & Access to Information, by phone at 613-520-2600 ext. 2047 or by e-mail via University_Privacy_Office@carleton.ca.