



# FOIP Request

**Please email the completed form to the FOIP Coordinator, nadine.morrison@psd.ca.**

**Request to Access Information (Purpose of collecting any personal information on this form is collected under Alberta's Freedom of Information and Protection of Privacy Act and will only be used to respond to this request.)**

Last Name  First Name

Address  City/Town/Village

Province  Postal Code

Telephone # (daytime)  (evening)  Fax Number

E-mail Address

What type of information do you want to access?

- General Information (An initial fee of \$25 is required also 25¢ per photocopy.)
- Personal Information (No initial fee is required, 25¢ per photocopy if over 100 sheets.)

If requesting personal information please enter your full name including any previous names that may be relevant and your DOB.

**Name**  **DOB**

**If you are requesting your personal information to be mailed to you please attach a copy of picture ID to this form.**

**Student Records Retention: Includes records relating to all information that affects the decisions made about the education of a student that is collected or maintained by the Board. Records are retained for seven (7) years from the date of graduation.**

Do you wish to receive a copy  or examine the Record  ?

Please list the type of information you are looking to access, giving as much detail as possible including time periods of the records and any schools if relevant to request.

**Signature**  **Date**

**Parkland School Division Official Only**

I,  **Name of Disclosing Official**  **Title**

Consent to  or refuse  this disclosure of information.  **Signature**