



Access to Information Request

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

Any personal information entered on the Access to Information Request form is collected under Alberta's Protection of Privacy Act (POPA) and will only be used to respond to this request.

Last Name	<input type="text"/>	First Name	<input type="text"/>
Address	<input type="text"/>		
Province	<input type="text"/>	City/Town	<input type="text"/>
Postal Code	<input type="text"/>		
Telephone	<input type="text"/>	Email	<input type="text"/>

What type of information do you want to access?

<input type="checkbox"/>	General Information	(An initial fee of \$25 is required, additional fees for services may apply.)
<input type="checkbox"/>	Personal Information	(No initial fee is required, additional fees for services may apply.)

If requesting personal information, please enter your full name below (including any previous names that may be relevant to the search) and date of birth. A copy of your government issued photo ID is required to be attached to this form.

Name	<input type="text"/>	DOB	<input type="text"/>
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Do you wish to receive a copy ☐ or examine a record ☐ ?

Please clearly describe the type of information you are looking to access, providing as much detail as possible including time periods and any schools relevant to the request. If the request does not provide enough detail to locate and identify a record with reasonable time and reasonable effort, we may contact you for clarity and/or there may be additional cost to the request or your request may be declined.

Signature	<input type="text"/>	Date	<input type="text"/>
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Parkland School Division Official Only

I, <input type="text"/>	<input type="text"/>
<i>Name of Disclosing Official</i>	<i>Title</i>

Consent to <input type="checkbox"/> or refuse <input type="checkbox"/> this disclosure of information.	<input type="text"/>
	<i>Signature</i>