

Personal information on this form is collected under Alberta's *Access to Information Act* and will be used to respond to your request. See instructions for completing this form.

About you

Title <i>(optional)</i>	Last Name	First Name		
Mailing Address	Street	City/Town/Village	Province	Postal Code
Telephone Number <i>(daytime)</i> ()	Telephone Number <i>(evening)</i> ()	Fax Number ()		
E-mail Address				

About your request

1. Whose information do you want to correct?

- Your own personal information
- Another person's information *(Please attach proof that you can legally act for the person.)*

2. To which public body are you making your request?

About the information you want to correct

1. What personal information needs to be corrected? *(Please give as much detail as possible. Be sure to give the complete name that is in the records if it is different from the name given above.)*

2. What correction do you want to make and why? *(Please attach any documents that support your request.)*

Your signature

Signature	Date
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Where to send your request

Send your completed request form to the Information Governance Coordinator, Town of Blackfalds, Box 220, 5018 Waghorn Street, Blackfalds, AB, T0M 0J0 or send an electronic copy to access@blackfalds.com.

FOR OFFICE USE ONLY	
Date Received	Request Number
	Comments

Request to Correct Personal Information

Instructions

You can correct information in many public body records without making a request under the *Access to Information Act*. To determine whether you need to make a request under the Act or if you need help completing the form, contact the Information Governance Coordinator of the public body to which you are making the request.

About you

In this part of the form enter:

- your last name, first name and preferred title, if any;
- your complete mailing address and daytime and evening telephone numbers so that public body can contact you about the request; and
- a fax number or e-mail address, if any, where correspondence may be sent.

About your request

1. Whose information do you want to correct?
Indicate whether you want your personal information or another person's information to be corrected.

Your personal information

If you want your information to be corrected, you will have to provide proof of your identity.

Another person's information

If you want the information of another person to be corrected, you will have to provide proof that you have the authority to act for that person. For example, you might provide proof that you are the person's guardian or trustee or that you have power of attorney for the person.

2. Enter the name of the public body that you believe has the records that you want corrected.

About the information you want to correct

1. What records contain the information that you want corrected?
 - Be as specific as possible in describing the records. The more specific your request, the more quickly and accurately it can be answered.
 - If you need more space, please continue your description on a separate sheet of paper and attach it to this form.

If you want a correction made to your own personal information, please be sure that you give:

- your full name;
- any other names that you have used on the records; and
- any identifying number that relates to the records, such as your employee number, case number or other identification number.

If you want a correction made to another person's information, please give:

- the person's full name;
- any other name that person may have used on the records; and
- any identifying numbers for the person if you know them.

2. What correction do you want made? What is incorrect about the information that is currently on the record? Please be specific.

Your signature

Sign and date the form.

Where to send your request

Send your completed form to:

Information Governance Coordinator
Town of Blackfalds
Box 220 | 5018 Waghorn Street
Blackfalds, AB
T0M 0J0
Phone 403.885.6370 | Fax 403.885.4610
access@blackfalds.com