

Request Form Freedom of Information and Protection of Privacy Act (FIPPA)

REQUEST FORM - FIPPA

GENERAL INFORMATION		
Select the preferred format for your request	Electronic	Paper
If you are requesting persona	al information on behalf	of another individual, please ensure to include:
 A signed consent from the you, or Proof of authority to act 		g the disclosure of their personal information to
Signature		
Date		
FOR INTERNAL U	SE ONLY	
Request number : Date :		

Any request for access to information and personal information must be addressed by email to Al-FOI_request@csf.bc.ca or by regular mail to:

Access to Information Conseil scolaire francophone de la Colombie-Britannique 100-13511 Commerce Parkway, Richmond, BC V6V 2J8

The personal information provided in this form is collected under the Freedom of Information and Protection of Privacy Act and will only be used to respond to your request. Any questions regarding this collection should be directed to the individual responsible for access to information and protection of personal information at the Conseil scolaire francophone de la Colombie-Britannique: Al-FOI_request@csf.bc.ca or by mail to 100-13511 Commerce Parkway, Richmond, BC V6V 2J8.

Document last updated: August 2023



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As a public organization, the Conseil scolaire francophone is subject to the Freedom of Information and Protection of Privacy Act of British Columbia.

PERSONAL INFORMATION SECTION

Name and surname

Email

Phone number

Category of Personal Information the request information access

Contact preference

Email

Phone number

INFROMATION ABOUT YOUR REQUEST

Please provide detailed information about the purpose of your request so that our teams can understand your needs and send you the requested documents (document name, timeframe, personal information correction, etc.). Subsequently, we will contact you to verify your identity.