



Regina Public Schools
 1600 4th Avenue
 Regina, SK S4R 8C8
 Tel (306) 523-3000

Local Authority Freedom of
 Information and Protection of Privacy
 Form A
 [Clause 6(1)(a)]

Access to Information Request Form

INFORMATION ABOUT YOU

Last Name

First Name

Name of Company or Organization (if applicable - optional)

Address

City

Province

Postal Code

Day Phone Number

Alternate Number

Fax Number

Email

INFORMATION ABOUT THE RECORDS YOU ARE REQUESTING

Are you requesting:

- your own personal information
- personal information about someone other than yourself (*attach proof that you have authority to receive the information requested*)
- general information

What records do you wish to access?

Please provide a detailed description of the records you wish to access. This information will help locate the records.

What is the time period for the records you are requesting (if applicable)?

This is a processing fee of \$20 payable to Regina Public Schools. The person managing your request may contact you to seek clarification or to discuss aspects of the request, including the application of additional fees if necessary. You may request a waiver of the processing fee or additional fees, but may be required to provide evidence of substantial financial hardship (see section 8 of the regulations).

Please keep a copy of this request for your records.

Check if requesting waiver of processing fees:

I request that payment of the fees related to this request be waived because payment will cause me substantial financial hardship. Details are as follows:
(Use reverse of form if additional space is required.)

Signature of Applicant

FOR OFFICE USE ONLY

Date Received

Application Number

30-Day Response Date