

Ministry of Government and Consumer Services

Access or Correction Request

Freedom of Information and Protection of Privacy Act

Personal information contained on this form is collected under the *Freedom of Information and Protection of Privacy Act* and will be used to answer your request.

Questions about this collection should be directed to the Freedom of Information and Privacy Coordinator at the institution where you make the request.

Many records of public institutions are available to you without making a request under the *Freedom of Information and Protection of Privacy Act*. Contact the Freedom of Information and Privacy (FOIP) Coordinator at the institution that holds the records to determine whether you need to make a formal request.

Section A - Type of Request

Fields marked with an asterisk (*) are mandatory.

Check the box that indicates what you are requesting. (Records that do not contain personal information are general records.)

The FOIP Coordinator will contact you to verify your identity before giving you access to your own personal information or to secure proof that you have authority to act for another person if making a request for another person's personal information records (e.g., power of attorney, guardian or trusteeship order).

Type of Request *

- Access to general records (non-personal information)
- Access to own personal information
- Access to other's personal information by authorized party
- Correction of own personal information

Name of institution request made to *

Ministry of Colleges and Universities

Freedom of Information and Privacy Coordinator Contact

Email Address: foi.educationministries@ontario.ca

Telephone Number: 416-325-0070

Section B - Requester's Information

Fields marked with an asterisk (*) are mandatory.

Please ensure you have entered your name, mailing address, telephone and email address accurately.

Last Name *

McKie

First Name *

David

Mailing Address

Canada U.S.A. International

Unit Number

Street Number

Street Name

PO Box

2011

Woodglen Cres.

City/Town *

Ottawa

Province *

ON

Postal Code *

K1J 6G7

Telephone Number

Home

Mobile

Business

613-290-7380

ext.

Email Address *

davidmckiec@gmail.com

Section C - Description of Records or Correction Requested

Fields marked with an asterisk (*) are mandatory.

Provide as much detail as possible about the requested general records, own personal information, other's personal information or correction of own personal information.

If you are requesting access to personal information, provide the name that appears on the records.

If you are requesting a correction of your own personal information, describe the personal information to be corrected. The Ministry of Colleges and Universities will contact you with next steps in the process.

Description of Records or Correction Requested *

The description of records or correction that you entered for this FOI eRequest has been removed for the purposes of this email to protect the security of any personal information that may have been included.

The institution that you selected has received the complete copy of the FOI eRequest inclusive of contents you entered in this field.

Time Period of the Records *

Specify the time period for the records as precisely as possible, e.g., from 2008/07/21 to 2009/11/30.

From (yyyy/mm/dd)

To (yyyy/mm/dd)

2022/01/01

2022/09/26

Method of Access *

Check a box to indicate whether you want to examine original documents (which may only be done on site) or receive copies.

Receive copy

Examine original (on site only)

Payment confirmation number: 24402518