Request to Correct Personal Information

Personal information on this form is collected under Alberta’s *Freedom of Information and Protection of Privacy Act* and will be used to respond to your request. See instructions for completing this form.

**About you**

<table>
<thead>
<tr>
<th>Title (optional)</th>
<th>Last Name</th>
<th>First Name</th>
</tr>
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<table>
<thead>
<tr>
<th>Mailing Address</th>
<th>Street</th>
<th>City/Town/Village</th>
<th>Province</th>
<th>Postal Code</th>
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<tr>
<th>Telephone Number (daytime)</th>
<th>Telephone Number (evening)</th>
<th>Fax Number</th>
</tr>
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<tr>
<th>E-mail Address</th>
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**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?
   For a complete listing of public bodies, consult the Directory of Public Bodies on the FOIP website at foip.alberta.ca.

   SOUTHERN ALBERTA INSTITUTE OF TECHNOLOGY (SAIT)

**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**

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

**Where to send your request**

Send your completed Request to Correct Personal Information form to SAIT, Attention: FOIP Coordinator, 1301-16 Avenue NW, Calgary, Alberta, Canada, T2M 0L4.

**FOR OFFICE USE ONLY**

<table>
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<tr>
<th>Date Received</th>
<th>Request Number</th>
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<table>
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<tr>
<th>Comments</th>
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SA 113 (2023/06) SAIT
Request to Correct Personal Information

Instructions
You can correct information in many public body records without making a request under the Freedom of Information and Protection of Privacy Act (the FOIP Act). To determine whether you need to make a formal request under the Act or if you need help completing the form, contact the SAIT FOIP Coordinator.

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:
Southern Alberta Institute of Technology (SAIT)
Attention: FOIP Coordinator
1301 - 16 Avenue NW
Calgary, Alberta T2M 0L4