

Completed by: Norfolk General Hospital Staff		
Received Date:	Request Number	Comments

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

This request must be accompanied by the \$5.00 application fee. Make cheque payable to Health Records - West Haldimand General Hospital and mail or deliver to: Health Information and Privacy Officer, West Haldimand General Hospital, 75 Parkview Road, Hagersville, ON N0A 1H0

Requestor's Information

Last Name	First Name	Middle Initial
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Mailing Address (Street, apartment #)

City	Province	Postal Code
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Daytime Telephone Number	Mobile Number
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Type of Request

Request for:	Preferred method of access to records:
<input type="checkbox"/> Access to general information <input type="checkbox"/> Access to own personal information <input type="checkbox"/> Correction to own personal information	<input type="checkbox"/> Examine original (on site only) or <input type="checkbox"/> Receive a copy

Requestor Signature	Date (DD/MMM/YYYY)
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All requests for personal information will require proof of identification before information can be released.

Description of Records

Please provide as much detail as possible about the request. Specify the time period for the records as precisely as possible Attach a separate sheet of paper if additional space is needed. If you are requesting access to your own personal information, please include all previous names and your date of birth. Please identify the information bank or record containing the personal information you are requesting, if known.

Note: If you are requesting a correction of personal information, please indicate the desired correction and if appropriate, attach any supporting documentation. You will be notified if the correction is not made and you may require that a statement of disagreement be attached to your personal information.

Personal information on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act and will be used to respond to your request. Questions about this collection should be directed to the Health Information and Privacy Officer at Norfolk General Hospital.