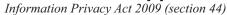
Information Privacy Personal Information Amendment Application





Please read the following information carefully before proceeding with your application

You have a general right to amend **your own personal information**, as provided under the *Information Privacy (IP) Act 2009*. Many agencies have administrative practices that allow you to amend your own personal information without the need to enter into a formal application process under the IP Act. It is recommended that you contact the Right to Information (RTI) officer of the agency concerned for assistance and advice about any administrative options available to you before completing and submitting this application form.

If you do wish to make a formal application to amend personal information under the IP Act, this is the approved application for to apply to Queensland government departments, Ministers, local governments, government owned corporations and public authorities (including universities). The completed application form should be submitted directly to the relevant agency and marked to the attention of the RTI officer.

Under the IP Act, you may apply to amend documents containing **personal information** where you believe that the relevant information is inaccurate, misleading, out of date or incomplete. There are no fees or charges for the application, but you will be required to provide evidence of your identity.

evidence of your identity.	
Note: Denotes Mandatory field	
Contact Details ———————	
	ss for correspondence. Additional contact details will help us to deal with your er you prefer. If you are applying on behalf of another person, please complete this
Title (e.g. Mr, Mrs, Ms, Miss) Given name/s	Family name
Postal address	
	Postcode
Preferred method of contact (Tick one option then fill ou	ut related field below. Please include country code and area code, where appropriate.)
Phone Fax Mobile Email	Post
Application Details —————	
1. Are you seeking to amend information or	n someone's behalf?
No	
Yes Family name	Given name/s
	n the person's behalf, such as legal documentation in support of your authority r) or written authorisation from the person concerned.
If you are an eligible family member, and you wish your relationship to the relative.	h to amend documents on behalf of a deceased relative, you must provide proof of
	ult child of the deceased person (if the spouse is not available), a parent of the t child are available) and others as listed in the IP Act. Please contact the RTI office a family member.
3. Which agency/s are you applying to?	
4. Particular details:	
Please provide specific and detailed information abo	
a. Describe the document/s you wish to amend	d, or select from the options below:
Letter / Memo Report	File Form
Other (please specify)	
information is inaccurate or misleading (include the	ate or misleading, please provide an explanation of how or in what way the personate changes proposed so that the personal information is not inaccurate or misleading document/s, with appropriate passages marked for the RTI officer's reference.

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c. If you claim that personal information is <u>out of date</u> or <u>incomplete</u> , please provide an explanation of <i>what information is necessar</i> to render the document up to date or complete (include the changes proposed so that the personal information is not out of date or incomplete). If possible, please attach a copy of the relevant document/s, with appropriate passages marked for the RTI officer's reference.
d. Provide any other supporting information that you believe will assist in the assessment of your application. (Attach additional pages if necessary)
5. Evidence of identity To protect your privacy and that of others, you must provide evidence of your identity with this application or within 10 business days o making this application in order for your application to be processed. If you are applying on someone's behalf, both parties must provid evidence of their identities. Applying:
by post - Attach a certified copy of your identification document to this application form.
in person - Produce the original identification document for the RTI officer to sight.
by email or fax - Provide a certified copy of the identification document to the relevant agency to which you are applying for information (A certified copy is considered valid if it is witnessed by a lawyer or notary public, a commissioner for declarations or a justice of the peace.)
Note: Documents that provide sufficient evidence of identity include: • Current driver's licence
Identifying page of current passport
Birth certificate
 Copy of a prisoner's identity card certified by a corrective services officer
 Statutory declaration of an individual who has known the applicant for at least one year (A declaration template can be downloaded at www.courts.qld.gov.au/Forms/General/Qldstatdec.pdf)
Declaration ————————————————————————————————————
Privacy Notice: In making this application, you are providing personal information such as name and contact details. This information will be used for the purpose of assessing your application and ensuring we are able to remain in contact with you regarding the status of your application. Your personal information will be accessed by persons who have been authorised to do so, including the decision maker in the agency to which your application relates Your personal information is handled in accordance with the <i>Information Privacy Act 2009</i> .
I declare that:
The information provided in this form is complete and correct
• I have read the privacy notice
• Where applicable, I have attached documents required for the purpose of this application (e.g. evidence of identity, authorisation to act or another person's behalf, evidence of financial hardship status)
 In the event I cannot attach any required copies of documents, I will provide them to the agency within 10 business days of making this application
I understand that it is an offence to give misleading information about my identity, and that doing so may result in a decision to refuse t process my application.
Signature Date
Office Use Only
Date received IP Ref
Satisfied as to Identity of ApplicantNo
Identity Document Sighted Yes Type
Receiving Officer (print name) Decision Maker Assigned to Application (print name)