

# FREEDOM OF INFORMATION 101

*a guide to accessing records in what is colonially referred to as Victoria, B.C. for people in the movement to dismantle the system of drug prohibition and criminalization in so-called Canada*

in this zine:

self location and why information matters  
who you can request records from  
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sources and shoutouts



## SELF LOCATION OF AUTHOR

The author of this zine is Elyse Frances Maria DeSousa Robinson (she/they). Elyse is a member of HARDLAW who self-identifies as a person who uses drugs. They are currently a tolerated trespasser on both łəkʷəŋən and W̱SÁNEĆ lands.

Elyse is a settler of Portuguese and British ancestry who was born and raised on the stolen lands of the Mississaugas of the Credit, in a city colonially referred to as Brampton, Ontario.

She is the first generation of her family to receive a post-secondary education, and the first person in her family to attend law school.

Elyse is dedicated to spending their future law career working to dismantle the system of drug prohibition and criminalization in so-called Canada.

## WHY INFORMATION MATTERS

Governments and public institutions should not be able to hide from the choices they make, the money they spend, and the harms they create. Access to information is important because it provides an avenue to hold people in positions of power accountable to the public they are supposed to be working for.

Is the access to information system flawed? Yes, absolutely. Will it get us out of the current system of drug prohibition & criminalization? No, not on its own. But can it be an effective tool to help us move forward in this work? I argue, that yes, it can be, we just need to understand how best to use it.

In my opinion, accessing information is intentionally made to be confusing, scattered and inaccessible in order to discourage people from making requests. This zine is an attempt to make it a bit easier for those living in what is colonially referred to as Victoria, B.C. by putting everything you need to make a request in one place.

*If you have any further questions and/or suggestions for improving this zine, please send an email to [hardlawuvic@gmail.com](mailto:hardlawuvic@gmail.com)*

In British Columbia, the **Freedom of Information & Protection of Privacy Act (FIPPA)** gives the public the right to access records from public bodies.

### WHO ARE CONSIDERED PUBLIC BODIES?

(1) a Ministry of the government of British Columbia, including the Premier's Office

- Relevant examples include:
  - Ministry of Health
  - Ministry of Housing
  - Ministry of Social Development & Poverty Reduction
  - Ministry of Public Safety & Solicitor General
  - (*former*) Ministry of Mental Health & Addictions

(2) everything listed in Schedule 2 of FIPPA

- i.e. B.C. Clinical & Support Services Society

(3) a local public body

- a local government body
- a health care body
- social services body (*Community Living B.C.*)
- an educational body
- a governing body of a profession or occupation listed in Schedule 3 of FIPPA

*The following page contain a list of local public bodies most involved in creating or enforcing policies related to drugs and/or people who use drugs...*

## LOCAL GOVERNMENT BODIES

### REGIONAL DISTRICTS

- i.e. Capital Regional District

### MUNICIPAL POLICE FORCES

- Victoria/Esquimalt Police Department
- Saanich Police Department
- Oak Bay Police Department

### MUNICIPALITIES

- i.e. City of Victoria

Any board, committee, commission, panel, agency or corporation that is created or owned by the municipality, regional district, or municipal police force & all the members or officers of which are appointed or chosen by or under the authority of that body.

## HEALTH CARE BODIES

### HOSPITALS

- Royal Jubilee Hospital
- Victoria General Hospital

### REGIONAL HEALTH BOARDS

- Island Health

### REGIONAL HOSPITAL DISTRICT & BOARDS

- Capital Regional Hospital District & Board

### PROVINCIAL MENTAL HEALTH FACILITIES

- Jack Ledger House, Victoria
- Seven Oaks Tertiary Mental Health Facility, Victoria

## EDUCATIONAL BODIES

### FRANCOPHONE EDUCATION AUTHORITY

- Conseil scolaire francophone de la Colombie-Britannique (CSF)
- Commission scolaire francophone de la Colombie-Britannique (CSFCB)

### SCHOOL BOARDS

- Greater Victoria (*district 61*)

### UNIVERSITIES

- University of Victoria
- Royal Roads University

## TYPES OF RECORDS YOU CAN REQUEST

*Each box includes an example that describes how to request that specific type of record from a Ministry or local public body. They are also real suggestions that you are welcome to use.*

### EMAILS & CORRESPONDENCE

Requesting copies of all emails & other correspondence from Victoria city councillors between the dates of November 1, 2022 to November 1, 2024 that mention s.16A (Overnight Shelter) of the Parks Regulation Bylaw (Bylaw NO.07-059), including general discussions about overnight sheltering in parks without specific reference to the bylaw number.

### BUDGET BREAKDOWNS

Requesting the total amount budgeted for & spent by the University of Victoria on overdose prevention & harm reduction during the 2019/2020, 2020/2021, 2022/2023, 2023/2024, and 2024/2025 academic years.

Also requesting a cost breakdown of each budget item classified under the umbrella of overdose prevention & harm reduction within the same identified time period.

### DOCUMENTS

Requesting copies of all documents, including reports, presentations, transcripts, meeting minutes, memos, or other records provided to the former Ministry of Mental Health & Addictions from January 1, 2023 to March 31, 2024 from the “broad range of partners and stakeholders who identified the need for ongoing investments in the broader system of care & supports that are responsive to the diverse needs of people who use drugs”, as stated in the former Ministry’s 2023/2024 Annual Service Report.

### NUMBERS

Requesting the number of Victoria/Esquimalt police officer apprehensions under s.28(1) of the Mental Health Act, where the person apprehended was immediately taken to a physician or nurse practitioner for examination, between the dates of January 1, 2019 to November 1, 2024, broken down monthly.

Please further separate the information into number of apprehensions of youth (persons under 18) and apprehensions of adults (persons over 18).

## TYPES OF RECORDS YOU CAN REQUEST

*Each box includes an example that describes how to request that specific type of record from a Ministry or local public body. They are also real suggestions that you are welcome to use.*

### REPORTS

Requesting copies of all Island Health Patient Care Quality Records from January 1, 2019 to November 1, 2024.

Requesting copies of all “Accountability Reports” created by the Oak Bay Police Board from January 1, 2020 to October 1, 2024.

Requesting a copy of the Chair’s Report from the Greater Victoria School District’s Board of Education regular board meeting on May 27, 2024.

### BRIEFING NOTES

Requesting a copy of the briefing note for the Ministry of Health in August 2024 titled: “BN - Clinical and Safety Rationales for Observed Consumption Services in Hospital Settings- FOR INFORMATION”.

Requesting a copy of the briefing note for the Ministry of Public Safety & Solicitor General from November 2023, titled: “Restricting Public Consumption of Illegal Substances Regulation”.

### EXPENSES

Requesting copies of all expense reports associated with the B.C. Association of Police Boards annual conference on May 25 and 26, 2024, including but not limited to, payment for speakers, hotel accommodations, catering costs, etc..

### CONTRACTS

Requesting a copy of the final contract and all additional amendments between Royal Roads University and the Company that provides the OverdoseKits installed throughout campus.

### POLICE REPORTS

- These types of requests can only be made if you were a part of the police interaction you are requesting information on (*i.e. a witness*) and after the investigation is officially closed.

### DATABASES

- These types of requests require you know the name and basic structure of the database. I highly recommend you call the Freedom of Information Office at (250) 387-5629 for help if you want to make these types of requests.

## CAN YOU AVOID PAYING FEES?

A non-refundable application fee of \$10 per public body is required for all requests for general information. (i.e. ministry of health request + ministry of housing request = \$20 application fee)

Unfortunately, the government of B.C. does not provide an option for people to request to waive their application fee for general requests.

However, requests for your own personal information are free.

*If you would like to make a general request, but cannot afford to pay the application fee, please send an email to [hardlawvic@gmail.com](mailto:hardlawvic@gmail.com) and we will see if we can help.*

If you are making a large or complex request, you may also be contacted with an estimate of an additional processing fee.

You can provide a written request to have this processing fee waived, in full or in part, if you show the head of the public body that you:

(1) cannot afford the payment, or for any other reason it is fair to excuse payment

(2) the record relates to a matter of public interest, including the environment or public health or safety

However, it is up to the head of the public body to determine whether or not to waive the processing fee.

## REQUESTING RECORDS WITHOUT A PERMANENT MAILING ADDRESS

Most request forms will ask you to provide a mailing address. However, they cannot deny your request if you do not have one. Simply include a note clarifying that you do not have a permanent mailing address, and instead include a phone number, email address, or the contact information of a friend who can vouch for you. Then ask if you can (1) pick up the records in person or (2) have the records emailed to you. If you do not have access to a computer, you can get a guest pass to use the computers at any Greater Victoria public library by showing staff at the front desk a piece of identification.

## WHAT TO DO IF YOUR REQUEST IS DENIED

Pursuant to section 52 of FIPPA, you may ask the Office of the Information and Privacy Commissioner to review any decision, act, or failure to act with regard to your request. You have 30 business days (*Mondays to Fridays, excluding holidays*) to file your review with the Office of the Information and Privacy Commissioner.

If you request a review or submit a complaint, please provide the Commissioner's Office with:

- (1) a copy of your original request;
- (2) a copy of the response you received; and
- (3) the reasons or grounds upon which you are requesting the review

In order to request a review or submit a complaint, send an email to:  
info@oipc.bc.ca

or mail your request to:

Information and Privacy Commissioner  
PO Box 9038 Stan Prov Govt  
4th Floor, 947 Fort Street  
Victoria, BC V8W 9A4

## REQUEST FOR REVIEW EXAMPLE

On behalf of HARDLaw, I am requesting the Office of the Information and Privacy Commissioner (OIPC) review whether the Ministry has fulfilled its duty to assist and is therefore not required to create a record in response to FOI Request \_\_\_\_\_

Our grounds for review are outlined below:

We submit that the “approximately 35 hours” the Ministry states it would take to create the record would not “unreasonably interfere with the operations of the public body”, as described in s.6(2)(b) of FIPPA.

While what constitutes an unreasonable interference is contextual, the Ministry of Health has not offered adequate justification as to why “35 hours of work,” in the present context, constitutes an unreasonable interference when 48 hours of work by this same Ministry has previously been found to not be unreasonable.



## REQUEST FOR RECORDS CHECKLIST

You have chosen which public body you would like to request records from (*i.e. City of Victoria, Oak Bay Police Service*)

You have located the specific request form used by the public body you are requesting records from (*i.e. Saanich Police Department Access to Records Form*)

You have determined the method you must use to complete & submit the request form (*i.e. handwritten and mailed, completed entirely online*)

You have described the type(s) of record(s) you are requesting (*i.e. emails between councillors, number of welfare checks ending in the person being detained*)

You have noted the specific time period for the records you are requesting (*i.e. June 2021 to June 2024, the incident on December 1, 2022*)

You have indicated how you want the information sent to you, if the option is available (*i.e. emailed to you, mailed via Canada Post, picked up in person*)

You have double checked that all of the information on the request form is complete and accurate (*i.e. correct spelling of address, signature provided*)

You have paid or attached your application fee (*i.e. \$10 if it is a request to one public body*)

## ONLINE FORMS & MAILING ADDRESSES

### City of Victoria Freedom of Information Request Form

[https://forms.office.com/pages/responsepage.aspx?id=FoEJ1-jGKlk2j7tsVtslzdVpHbtsv2rVlvuk\\_4UiHJJUFURjRjWVQ5SVFINzNT-VFFWVjhDODjGSzjVTy4u](https://forms.office.com/pages/responsepage.aspx?id=FoEJ1-jGKlk2j7tsVtslzdVpHbtsv2rVlvuk_4UiHJJUFURjRjWVQ5SVFINzNT-VFFWVjhDODjGSzjVTy4u)

### B.C. Government Freedom of Information Request Form

<https://foirequestform.gov.bc.ca/#>

#### **Greater Victoria School District #61**

email:

[FOI@sd61.bc.ca](mailto:FOI@sd61.bc.ca)

or mail to:

Attention: FOI (Executive Assistant,  
Superintendent's Office)

The Greater Victoria School District  
No. 61

556 Boleskine Road  
Victoria, BC V8Z 1E8

#### **Island Health**

email:

[FOI@islandhealth.ca](mailto:FOI@islandhealth.ca)

or mail to:

Island Health Corporate  
FOI Office

Information Stewardship,  
Access and Privacy  
1952 Bay Street  
Victoria, BC V8R 1J8

*The following pages contain the form templates you would use to submit a  
freedom of information request to these local public bodies...*



**VICTORIA POLICE DEPARTMENT**  
**FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**  
**REQUEST FOR ACCESS TO RECORDS**

IMPORTANT INFORMATION – PLEASE READ FIRST - THIS FORM MUST BE COMPLETED IN FULL			
<p>1. If you are requesting information about yourself, we require <b>A COPY OF YOUR GOVERNMENT ISSUED IDENTIFICATION</b> (eg. Drivers license). Due to the nature of our records, no information will be sent to you until we receive a copy of your identification.</p> <p>2. Under the Freedom of Information and Protection of Privacy Act, we have (30) business days (excluding weekends and holidays) to respond to requests for information. We process requests in the order that they are received. We will <u>not</u> make any exceptions.</p> <p>3. Personal information contained on this form is collected under section 26 of the Freedom of Information and Protection of Privacy Act and will be used only for the purpose of responding to your request.</p>			
YOUR NAME			
LAST NAME	FIRST NAME	MIDDLE NAME	<input type="checkbox"/> MISS <input type="checkbox"/> MS. <input type="checkbox"/> MRS. <input type="checkbox"/> MR. <input type="checkbox"/> OTHER _____
IF YOU ARE REQUESTING INFORMATION ABOUT YOURSELF, PLEASE PROVIDE YOUR DATE OF BIRTH: (YR/MO/DAY) _____			
IF YOU HAVE EVER GONE BY A DIFFERENT NAME PLEASE INDICATE THAT NAME USED: _____			
YOUR ADDRESS			
MAILING ADDRESS	CITY/TOWN	PROVINCE/COUNTRY	POSTAL CODE
CONTACT INFORMATION			
DAY PHONE NO. (     )	ALTERNATE PHONE NO. (     )	EMAIL ADDRESS	
DETAILS OF REQUESTED INFORMATION			
FILE NUMBER IF KNOWN:	DATE OF INCIDENT:	LOCATION OF INCIDENT:	
IF YOU CANNOT PROVIDE THE INFORMATION ABOVE, PLEASE USE THE SPACE BELOW TO DESCRIBE THE RECORDS YOU ARE REQUESTING. BE SPECIFIC AS POSSIBLE, AS THIS WILL ASSIST THE REQUEST PROCESS.			
DO YOU REQUIRE A SUMMARY OF THE FILES IDENTIFIED IN YOUR POLICE HISTORY CHECK? <input type="checkbox"/> Yes <input type="checkbox"/> No (if so, please attach a copy)			
ARE YOU REQUESTING ACCESS TO ANOTHER PERSON'S PERSONAL INFORMATION? <input type="checkbox"/> Yes <input type="checkbox"/> No IF SO, PLEASE ATTACH AS APPROPRIATE: A) THAT PERSON'S SIGNED CONSENT FOR DISCLOSURE, OR B) PROOF OF AUTHORITY TO ACT ON THAT PERSON'S BEHALF YOUR SIGNATURE: _____		PREFERRED METHOD OF ACCESS TO RECORDS Please note: We do not fax our records  <input type="checkbox"/> EXAMINE ORIGINAL <input type="checkbox"/> RECEIVE COPY, IF YES: <input type="checkbox"/> BY MAIL <input type="checkbox"/> PICKUP <input type="checkbox"/> EMAIL IF YOU DO NOT HAVE A MAILING ADDRESS, PLEASE INDICATE "PICKUP". A RESPONSE TO YOUR REQUEST WILL BE AVAILABLE AT THE FRONT DESK OF THE VICTORIA POLICE DEPARTMENT WITHIN 30 BUSINESS DAYS.	
		DATE SIGNED: _____	
FOR PUBLIC BODY USE ONLY			
FOI #	DATE RECEIVED	NOTES	

email signed copy to:  
**foi@vicpd.ca**

or mail to:  
Victoria Police Department  
850 Caledonia Avenue  
Victoria, BC V8T 5J8  
**ATTENTION: Information and Privacy Section**



This form must be completed in full.

Please print and complete this form, then forward it to the SPD - Attr: Information & Privacy OR drop it off at the SPD front counter.

1. We require a copy of your government issued ID (eg. Drivers Licence). No personal information will be sent to you until we receive your ID.

2. We will only FAX copies of police reports under extenuating circumstances. You may make arrangements to pick up the report, have it sent to you via Canada Post, or emailed.

CHECK ONE: MAIL ☐ PICK UP ☐ EMAILED ☐

3. Under the BC Freedom of Information and Protection of Privacy Act, we have (30) days (excluding weekends and holidays) to respond to requests for information. We process requests in the order they are received. However, we may make exceptions under urgent circumstances upon request.

4. Personal information contained on this form is collected under the BC Freedom of Information and Protection of Privacy Act and will be retained within an police record associated to the request.

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

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If you are requesting information about yourself, please provide your Date of Birth: (YR/MO/DAY): \_\_\_\_\_

If you have ever gone by a different name, please indicate the name previously used: \_\_\_\_\_

## STREET, APARTMENT NO., PO BOX. CITY/TOWN PROVINCE/COUNTRY POSTAL CODE

DAY PHONE NO.	ALTERNATE PHONE NO.	EMAIL ADDRESS
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INFORMATION REQUESTED: PLEASE DESCRIBE THE RECORDS YOU ARE REQUESTING AND PROVIDE CASE/FILE NUMBERS IF KNOWN. BE AS SPECIFIC AS POSSIBLE, AS THIS WILL ASSIST WITH THE REQUEST PROCESS. ATTACH A SEPARATE SHEET IF THERE IS INSUFFICIENT SPACE BELOW.

[illegible]


ARE YOU REQUESTING ACCESS TO ANOTHER PERSON'S PERSONAL INFORMATION? YES ☐ NO ☐

IF SO, PLEASE ATTACH AS APPROPRIATE: (A) THAT PERSON'S SIGNED CONSENT FOR DISCLOSURE AND COPY OF THEIR ID, OR  
(B) PROOF OF AUTHORITY TO ACT ON THAT PERSON'S BEHALF (EG. POWER OF ATTORNEY).

SIGNATURE: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_

or mail to:  
Attention: Information and Privacy Coordinator  
Saanich Police Department  
760 Vernon Ave  
Victoria, BC V8X2W6

attend in person or mail to:  
Oak Bay Police Department  
1703 Monterey Avenue  
Victoria BC  
Canada V8R 5V6  
**ATTENTION: Information and Privacy Section**

	<p>Oak Bay Police Department</p> <p>Freedom of Information and Protection of Privacy Request for Access to Records</p>	<p>Police Use Only Date Received: _____</p> <p>Received by: _____</p>
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**IMPORTANT INFORMATION- PLEASE READ FIRST**

**THIS FORM MUST BE COMPLETED IN FULL**

1. If you are **requesting information about yourself**, we require **A COPY OF YOUR GOVERNMENT ISSUED IDENTIFICATION** (e.g. Driver's Licence). Due to the nature of our records, no information will be sent to you until we receive a copy of your identification.
2. We do **not** fax copies of police reports. You may make arrangements to pick up the report or we will send it to you via Canada Post. CHECK ONE: ☐ Mail ☐ Pick up
3. Under the BC Freedom of Information and Protection of Privacy Act, we have (30) days (excluding weekends and holidays) to respond to requests for information. We process requests in the order that they are received. We will not make any exceptions.
4. Personal information contained on this form is collected under the BC Freedom of Information and Protection of Privacy Act and will be used only for the purpose of responding to your request.

**YOUR NAME**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
☐ Ms ☐ Miss ☐ Mrs  
☐ Mr ☐ Other \_\_\_\_\_

If you are requesting information about yourself, provide your date of birth: \_\_\_\_\_  
(year/month/day)

If you have ever gone by different name(s) please indicate name(s) used: \_\_\_\_\_

**YOUR ADDRESS**

Street Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Province/Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**YOUR TELEPHONE**

Day Phone No: \_\_\_\_\_ Alternate Phone No: \_\_\_\_\_  
( ) ( )

**DETAILS OF REQUESTED INFORMATION**

Describe the records you are requesting and provide a case/file number if known. Be as specific as possible, as this will assist with the request process. Attach a separate sheet if the space below is not sufficient.

Are you requesting access to another person's personal information? ☐ Yes ☐ No  
If Yes, attach: (a) that person's signed consent for disclosure, or  
(b) proof of authority to act on that person's behalf (e.g. Power of Attorney)

Your Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

 Making a difference...together	<b>FOI &amp; Privacy Office</b> Capital Regional District 625 Fisgard Street, PO Box 1000 Victoria, BC, Canada V8W 2S6	T: 250.360.3000 <a href="mailto:foipp@crd.bc.ca">foipp@crd.bc.ca</a> <a href="http://www.crd.bc.ca">www.crd.bc.ca</a>	FOR CRD USE ONLY Request Number -----
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## FOI ACCESS REQUEST

PART 1 - Request under the *Freedom of Information and Protection of Privacy Act* for:

- ☐ Access to records on a particular subject  
☐ Access to own personal information  
☐ Access by an authorized party to information about another individual

## PART 2 – Applicant's Information

Last Name		First and middle name(s)	
Apt. No / PO Box	Street number and name		
City		Province	Postal code
Day Phone or Cellular No.		E-mail address	

PART 3 – Information Requested (Please describe the records you are requesting, including applicable date range. Be as specific as possible, as this will assist the request process. Attach a separate sheet if the space below is not sufficient.)

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ARE YOU REQUESTING ACCESS TO ANOTHER PERSON'S PERSONAL INFORMATION? ☐ YES ☐ NO  
IF YES, PLEASE ATTACH, AS APPROPRIATE:  
(a) That person's signed consent for disclosure OR (b) Proof of authority to act on that person's behalf.

REQUESTED INFORMATION TO BE: (Choose one option) <input type="checkbox"/> Picked up from Fisgard Office by you (ID required) <input type="checkbox"/> Secure electronic transfer to your email address provided <input type="checkbox"/> Mailed by regular or registered post to address provided at your cost	YOUR SIGNATURE	DATE SIGNED (DD/MM/YY)
The Act provides that we must respond within 30 business days of receipt of your request, except in special circumstances where limited extensions may be made. Pursuant to the Act and to our Bylaw No. 3945 there may be a charge to process the request. We will provide you with a fee estimate, if applicable, within 20 business days of receiving your request.		
YOU MAY MAKE A REQUEST FOR ACCESS TO RECORDS WITHOUT USING THIS FORM, PROVIDED YOU DO SO IN WRITING. Personal information collected on this form is collected under section 26(c) of the <i>Freedom of Information and Protection of Privacy Act</i> and will be used only for the purpose of responding to your request. Enquiries about the collection or use of this information can be directed to the Manager, FOI and Privacy at the address above.		



Privacy and Access to Information Office  
PO Box 1700 STN CSC Victoria BC V8W 2Y2  
T 250-472-4914 | foipp@uvic.ca

Date form completed: DD/MM/YYYY (required)

## FOI ACCESS REQUEST

**PART 1** - Request under the [Freedom of Information and Protection of Privacy Act](#) (FIPPA) for:

- ☐ Access to records on a particular subject.
- ☐ Access to records containing own personal information.
- ☐ Access to information about a third party. (Proof of identity and/or of representation required, see below.)

**PART 2** - Applicant's Information

Last Name		First and middle name(s)		
Apt. No / PO Box	Street number and name			
City	Province	Postal code	UVic ID V00	
Day Phone or Cellular No.		E-mail address		

**PART 3** - Description of Records Sought (provide as much detail as possible below about the records)

(a) Time period of records (dd/mm/yyyy):

From:	To:
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(b) Location of records (please specify where records might be located, i.e., name of faculty, school, department):

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(c) Description of Records (you may enclose a separate page with this form):

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**PART 4** - Proof of Identity and/or Representation (an incomplete access request would create delays in its processing):

For access to records containing personal information about you, enclose with the access request either a copy of your UVic I.D. or a government issued I.D. to confirm your identity.

For access to records containing personal information that is not about you, enclose with the access request a UVic [Consent for Personal Information Disclosure to a Third Party](#) form, completed and signed by the Third party. You may create a consent containing the same information asked in the UVic form, including a mode for us to contact the third party directly.

Access to records containing information about a minor or the deceased is strictly regulated by the FIPPA; review sections 4, 5, or 6 and 11 in the [FIPPA's Regulation](#) for compliant representation, and enclose with your access request copies of the applicable documents. You may contact our office at foipp@uvic.ca for clarification on the Regulation.

Please send the completed form with its enclosures, if applicable, to the Access to Information Officer at the address above. We recommend that requests for personal information be encrypted. Instructions on how to encrypt documents are available at <https://www.uvic.ca/systems/support/informationsecurity/fileencryption/>

Personal information contained on this form and the copy of any I.D. is collected pursuant to the *Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of responding to this access request.



FORMULAIRE - DEMANDE D'ACCÈS À L'INFORMATION

En tant qu'organisme public scolaire, le Conseil scolaire francophone est assujéti à la Loi sur l'accès à l'information et la protection des renseignements personnels de la Colombie-Britannique (Freedom of Information and Protection of Privacy Act).

RENSEIGNEMENTS GÉNÉRAUX

Prénom et nom

Adresse courriel

Téléphone

Type de demande	Renseignements personnels	Accès à l'information
Préférence de contact	Adresse courriel	Téléphone

RENSEIGNEMENTS SUR LA DEMANDE

Veuillez détailler l'objet de votre demande pour que nos équipes puissent comprendre vos besoins et vous envoyer les documents demandés (nom du document, période, rectification de renseignements personnels, etc.). Dans un second temps, nous vous recontacterons pour procéder à la vérification de votre identité.



**FORMULAIRE - DEMANDE D'ACCÈS À L'INFORMATION**

**RENSEIGNEMENTS GÉNÉRAUX**

Cochez le format préféré  
pour votre demande

Électronique

Papier

Si vous demandez des informations personnelles au nom d'une autre personne, veuillez vous assurer de joindre :

- Un consentement signé de cette personne autorisant de vous divulguer ses renseignements personnels, ou
- Une preuve du pouvoir d'agir au nom de cette personne.

Signature

Date

**POUR USAGE INTERNE AU CSF SEULEMENT**

Numéro de requête :

Date de réception :

Toute demande d'accès à l'information et aux renseignements personnels doit être adressée par courriel à AI-FOI\_demande@csf.bc.ca ou par courrier régulier, à l'attention de :

Accès à l'information  
Conseil scolaire francophone de la Colombie-Britannique  
100-13511 Commerce Parkway,  
Richmond (C.-B) V6V 2J8

Les informations personnelles continues dans ce formulaire sont collectées en vertu de la Loi sur l'accès à l'information et la protection de la vie privée, et ne seront utilisées que pour répondre à votre demande. Les questions concernant cette collection doivent être adressées à la personne responsable de l'accès à l'information et de la protection des renseignements personnels au Conseil scolaire francophone de la Colombie-Britannique : AI-FOI\_demande@csf.bc.ca ou par courrier au 100-13511 Commerce Parkway Richmond, CB V6V 2J8.

Mise à jour du document : août 2023



## Freedom of Information and Protection of Privacy Act

### Request for Review / Privacy Complaint Form

**Instructions:** This form is designed to assist you in requesting a review of a public body's response to your access request or to submit a privacy complaint about how a public body is collecting, using or disclosing your personal information under the *Freedom of Information and Protection of Privacy Act* ("FIPPA").

**Fill out this form and send it to the Office of the Information & Privacy Commissioner ("OIPC").** Address information is at the end of this form.

*(Do not use this form if your complaint or request for review is with a private sector organization, such as a business or non-profit organization. A special form is available for such complaints or reviews, which are regulated under the Personal Information Protection Act ("PIPA").)*

FIPPA and materials that may assist you in completing this form are available at <http://www.oipc.bc.ca/> or by calling (250) 387-5629 in Victoria. For toll-free access call Enquiry BC in Vancouver at (604) 660-2421 or elsewhere in BC at 1-800-663-7867 and ask to be transferred to (250) 387-5629.

**Privacy Notice:** A copy of this form will be provided to the public body that is the subject of your request for review; a copy may be provided concerning complaint issues. The information you provide on this form, attached to this form or that you supply later, will only be used to attempt to resolve your dispute.

Name:

Preferred pronoun:

Mailing address:

City:

Province:

Postal code:

Contact Phone No.:

Home

Work

Cell

Alternate Phone No.:

Home

Work

Cell

Fax No:

Email Address:

*(Provide only if you prefer to receive communication by email)*

Please indicate the best time to contact you, as well as any other contact restrictions. (The OIPC office hours are Monday to Friday, from 8:30 a.m. to 4:30 p.m. PST).

1. Are you making this request for review or complaint: on behalf of yourself?  
(Please check only one box) on behalf of another individual?

*(If you checked "on behalf of another individual", attach supporting documentation proving that you have the authority, or consent of that individual, to act on his/her behalf.)*

2. Which public body does your request for review or complaint concern?
3. Who have you dealt with at the public body to try to resolve your complaint or access request? *(List the names, titles, phone numbers or addresses of people with whom you have had contact.)*

4. Tell us about the steps you have taken to try to resolve your complaint *(Complaints should first be submitted directly to the public body for response and possible resolution; there are limited exceptions.)*

- |  |     |    |
|--|-----|----|
| • Have you attempted to resolve the matter with the public body?   | Yes | No |
| • If yes, did you write to the public body outlining your concerns or to object to the public body's initial decision? | Yes | No |

5. Have you received a written decision from the public body? Yes No

If yes, what was the date of the letter and when did you receive it? *(Please attach the letter to this application.)*

6. Choose one or more of the following to describe what your appeal to the OIPC relates to:

Requests for review:

Third Party requesting review prior to disclosure  
Denial of existence of records  
Record not under control or in custody  
How access is to be given  
Withholding records  
Severing information from records  
Deemed refusal (no response within 30 days of your access request) if no extension  
Correction of personal information request  
Records outside the scope of the Act  
Other

Complaints:

Adequacy of search for records  
Collection, use or disclosure of your personal information  
Fee assessment  
Fee waiver refused  
Extension of time/transfer  
Security  
Retention  
Other

7. Summarize your request for review or complaint (*please indicate any file or reference numbers and relevant dates*).

8. How do you think the OIPC can assist you? Describe the result or outcome that you seek.

Signature:

Date:

Attach copies of the following documents if you have them:

Your letter to the public body requesting access to records.

Your letter of complaint to the public body.

The public body's response to your complaint or access request.

Any other correspondence between you and the public body regarding this matter.

Documentation authorizing you to act on behalf of another person (if applicable).

**Send this form and accompanying documents to:**

Office of the Information and Privacy  
Commissioner for British Columbia P.O. Box  
9038, Stn. Prov. Govt.  
Victoria, B.C. V8W 9A4

Fax: (250) 387-1696  
Email: [info@oipc.bc.ca](mailto:info@oipc.bc.ca)

Please call the OIPC if you need help completing this form:

Phone: (250) 387-5629 (Victoria)

Toll-free: (604) 660-2421 (Lower Mainland) or 1-800-663-7867 (elsewhere in B.C.); ask for transfer to (250)387-5629.

*For OIPC use only:*

Date stamp:

Received by:

Initials:

( Print name )

## **SOURCES AND SHOUTOUTS**

### **SECRET CANADA - HOW TO FILE AN FOI REQUEST**

<https://www.secretcanada.com/foi-guides-and-resources/how-to-file-foi-request>

### **OFFICE OF THE INFORMATION & PRIVACY COMMISSIONER FOR BRITISH COLUMBIA - HOW DO I REQUEST RECORDS**

<https://www.oipc.bc.ca/for-the-public/how-do-i-request-records/>

### **FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**

[https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/96165\\_00](https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/96165_00)

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