Applicant's Details

Application for amendment form

Application under the **Privacy and Personal Information Protection Act 1998** and/or **Health Records and Information Privacy Act 2002** for amendment to the applicant's personal and/or health information.

Family name:		Given name:
Title: Mr / Ms / Other:		Phone number:
Email address:		
Postal address:		
State:	Post Code	
If application relates to another person		
Your family name:		Your given name:
Title: Mr / Ms / Other:		Phone number:
Postal address:		
State:	Post Code	
Applicant's relationship to this other person¹:		
1 Access and seek		

1. Access and cost

As an applicant you have a right under the Privacy and Personal Information Protection Act 1998 and/or Health Records and Information Privacy Act 2002 to request amendment of your personal and/or health information that is held by the NSW Department of Education to ensure it is accurate and, having regard to the purpose for which it was collected, relevant, up to date, complete and not misleading.

If the department is not prepared to amend the information, you may request that it attach to the information a statement of the amendment sought.



NSW Department of Education

The department may refuse to process your application in part, or in whole, if there is an exemption under the Privacy and Personal Information Protection Act 1998 and/or Health Records and Information Privacy Act 2002 that restricts the amendment sought.

If you are dissatisfied with the department's decision in respect of your access application, then you may complete a **Privacy Internal Review Application Form** to complain about the decision and seek a review.

2. Proof of Identity

When seeking amendment of your personal and/or health information, or another person's on whose behalf you act (including your child's) personal and/or health information, you may be required to provide proof of identity (eg, Australian driver photo licence, current Australian passport, etc).

You will be advised by the person processing your application if proof of identity is required.

3. Amendment requested

I am seeking amendment of my own personal and/or health information.

I am seeking amendment of personal and/or health information about my child or person for whom I have legal guardianship.²

I am seeking amendment of personal and/or health information on behalf of another person other than $my \ child.^3$

I am seeking to amend information on behalf of another person (other than my child) for the following reason/s: [complete information on a separate page if necessary].

I am seeking the following amendments to information held by the department: [complete information on a separate page if necessary].

I am seeking the above information for the period from

to

I have attached documents to this application which I would like the department to consider in deciding whether to make my requested amendment.

4. Where to send your application

Your application can be submitted to the business centre holding the information or Legal Services via email: legal.privacy@det.nsw.edu.au or by mail to:

Legal Services NSW Department of Education Level 5, 105 Phillip Street PARRAMATTA NSW 2150

5. Signature and declaration

I declare that the information I have provided on this form is true and correct.

Signature and date:

Privacy Notice: The information provided on this application form is being obtained for the purpose of processing your application for access to information. It will be stored securely. If you do not provide all or any of this information it could prevent or delay the processing of your application.

- 1 If you are the parent/legal guardian, please advise if there is a current Family Court parenting order and attach a copy of the parenting order to the application.
- 2 Please provide evidence of your relationship which the person whose personal information you are requesting if the department does not already hold that information.
- 3 If you are applying on behalf of another person other than your child or a person for whom you have legal guardianship please provide written authority and ID from that person.