

## PERSONAL INFORMATION ACCESS REQUEST FORM

(This form is intended to be used by individuals who want to request personal information of theirs that is in the control of the BC Teachers' Federation.)

Date of request: \_\_\_\_\_

### Request for Information

To process your request, we require the following information (completion of pages 1 and 2 are required):

Full name (please print):

\_\_\_\_\_

Address:

\_\_\_\_\_

Relationship to BCTF (e.g., member, retired member):

\_\_\_\_\_

Membership number (if applicable):

\_\_\_\_\_

Contact phone number(s):

\_\_\_\_\_

Email address (must be provided to receive information electronically):

\_\_\_\_\_

The British Columbia Teachers' Federation (BCTF) stores information in a number of databases and files. To enable us to process your request quickly and efficiently, please outline as specifically as possible the information you would like to receive and provide us with a summary of the departments which you believe may have the information that you are looking for. BCTF will begin processing your request as soon as this form is completed and received by the BCTF Privacy Officer. BCTF will make all attempts to respond within 30 days of receipt of your request.

Information requested (please be as specific as possible):	
This information is associated with the following BCTF departments:	
1.	
2.	
3.	
4.	
5.	
Consent to receive personal information—please initial one of the three option below.	
	<p>1. Hardcopies—Pick up</p> <p>I consent for the BCTF to collect and compile my personal information into a package which I will personally retrieve from the BCTF office building at a mutually agreed upon day and time.</p>
	<p>2. Hardcopies—Courier</p> <p>I consent for the BCTF to collect and compile my personal information into a package which I will be responsible for arranging courier pick up from the BCTF office building and delivery.</p>
	<p>3. Electronic copies</p> <p>I consent for the BCTF to release my personal information documents to me via an electronic method such as email and understand the BCTF is not responsible for any resulting breach of confidentiality that may occur after it is sent.</p>
Requestor signature: _____	

**Snail mail**

Print completed form and place in an envelope marked “Confidential” and address it as follows:  
 BC Teachers' Federation  
 Attention: Privacy Officer  
 100–550 West 6th Avenue  
 Vancouver, BC V5Z 4P2

**Email**

Attach completed form to an email addressed to the Privacy Officer, [privacy@bctf.ca](mailto:privacy@bctf.ca), with the subject line “PIPA Request.”

## PERSONAL INFORMATION ACCESS REQUEST FORM

The following fee schedule, for access requests under the *Personal Information Protection Act* (PIPA), will be applied:

### **Copying Costs**

- No copying charges will be levied for packages with fewer than 25 pages.
- For all packages containing 26 pages or more, a fee of 20 cents per copy will be charged to the requestor for the copying of the 26th page and thereafter.

### **Courier Costs**

If hardcopies of the compiled information are requested, the requestor is responsible for all courier costs. As per the consent area of this form, the requestor is responsible for arranging courier pick up from the BCTF office building and delivery.

### **Staff Time (Location, Retrieval, and Copying of Material)**

No charges will be levied for the first three hours of staff time. For each quarter-hour thereafter, a fee of \$5 will be charged for the location, retrieval, and copying of documents.

### **Maximum Fee**

No individual will be charged more than \$300 for the above services for any one access-to-personal information request.

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