



Personal Information Request Form
This form relates to personal information held by Supply Chain Canada

REQUEST FOR:

- Access to own personal information
 - Response to complaint about personal information policy and/or procedures
-

(PLEASE TYPE OR PRINT CLEARLY)

Supply Chain Canada Institute or Provincial/Territorial jurisdiction that you belong to:

..... Member/Student no.

Name: Mr. /Mrs. /Ms.
Given Name Initial(s) Surname

Home Address:

.....
.....

Personal e-mail: Home Tel.

Employer: Title/Position.....

Employer Address:

.....
.....

Business e-mail Business Tel.

Preferred Mailing Address: Home Business



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DETAILED DESCRIPTION OF REQUESTED PERSONAL INFORMATION, OR SECTION OF POLICY AND/OR PROCEDURE SUBJECT TO COMPLAINT:

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.....

PREFERRED METHOD OF ACCESS TO RECORDS:

Examine original Receive copy

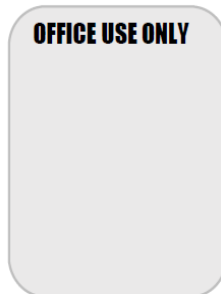
Signature:

Date:

Personal information contained on this form is collected pursuant to the Personal Information Protection and Electronic Documents Act, and will be used for the purpose of responding to your request. Complete, sign, and date this form, and mail or fax it to:

Attn: Privacy Department
Supply Chain Canada
1 Dundas Street West, Suite
2704, P.O. Box 64
Toronto, Ontario
M5G 1Z3

Fax (416) 977-8886



Date received

Request number

Comments

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