



APPLICATION FOR AMENDMENT

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.

APPLICANT'S DETAILS

Family name: Given name

Title: Mr / Ms / other Phone number

Postal address:

State: Post Code:

Email (optional):

If application relates to another person

Your family name: Your given name:

Title: Mr / Ms / other Phone number

Postal address:

State: Post Code:

Email (optional):

Your relationship to the applicant¹:

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.

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.

You have a right to request an internal review by the department of a decision in relation to your application for amendment. A [request for internal review](#) can be sent to the address listed below.

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 information on behalf of another person other than my child for the following reason/s: [complete information on a separate page if necessary]

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.....

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

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.....

- 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@det.nsw.edu.au or by mail to:

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

You application can be lodged at the business centre that holds the personal or health information you wish to have amended or, if not known, to the address or email listed above.

5. Signature and declaration

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

Signed 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 parenting order and attach a copy of the parenting order to the application.

² Please provide evidence of your relationship with 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.