

Request for Personal Information Form

To be completed by individuals (applicants), or related parties (applicant representatives), who are requesting personal records held by Uniting WA.

- **Requests for Service User information:**

Please return a completed copy of this form, along with the applicant's ID and consent (if required) to: Chief Administrative Officer, via e-mail (sue.thomas@unitingwa.org.au) or by post (GPO Box B74, Perth WA 6838).

- **Requests for Worker information:**

Please return the completed copy of this form, along with the applicant's ID and consent (if required) to: Chief Organisational Development and Change Officer, via e-mail (jen.park@unitingwa.org.au) or by post (GPO Box B74, Perth WA 6838).

Section 1: Applicant Contact Details (individual whose personal information is being requested)

Name (first, last):			
Contact Number:		E-mail:	
Other names you may be known by (maiden name, nick names, other family names, etc):			
Date of Birth:			
Current or former relationship with Uniting WA (please tick):	Service User	Worker	Other:

Section 2: Applicant Representative Contact Details (if applicable)

Name (first, last):			
Relationship to applicant:		Organisation (if any):	
Contact Number:		E-mail:	
Address:			Post Code:

If you are acting on behalf of the applicant, please attach the applicant's consent/ evidence of your authority to do so.

Section 3: Purpose (intended use / purpose of the information being requested)

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Section 4: Information Requested

Date range in question (if known):	
Service / program/ location (if known):	

Section 5: Applicant/ Applicant Representative Declaration

By signing below, the applicant or applicant's representative, acknowledges that all information requested is strictly for the purposes indicated above, and must be kept securely in accordance with Uniting WA's [Privacy Policy](#).

Name:		Signature:		Date:	
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(OFFICE USE ONLY)

Section 6: Supporting Documents Attached

Applicant's ID 1:	
Applicant's ID 2:	
Signed Consent form (if required):	Yes Not Applicable
Other supporting documents:	

Section 7: Information Release (file has been reviewed / redactions have been checked by:)

Name:		Position title:	
Signature:		Date:	
Comments:			

Section 8: Authorisation

Approved	Not Approved	Reason:	
Name:		Position title:	
Signature:		Date:	

Uniting WA is committed to ensuring that all personal and sensitive information gathered by the organisation will be collected, maintained, used, stored, and disposed of in accordance with requirements and obligations of the *Privacy Act 1998*, the Australian Privacy Principles, and Uniting WA's [Privacy Policy](#).

Requests for Personal Information will be acknowledged as soon as practicable (within Uniting WA's operational business hours), following submission.

All requests are reviewed and processed within **30 business days** of receiving a signed and dated copy of the [Request for Personal Information Form](#).

Applicants must provide proof of their identity along with the completed form.

Outcome determinations will be returned, in writing, to applicants (or applicant representatives), using the contact information provided in this form.