

Informal Request for Information

Government Information (Public Access) Act 2009 (GIPA)

Please print in BLOCK LETTERS with a black or blue pen

Complete this form to apply for the informal release of information under the *Government Information (Public Access) Act 2009 (GIPA Act)*. The Department of Communities and Justice (the Department) reserves the right to ask you to lodge a formal access application, including where the work involved exceeds our 2 hour limit of processing time.

If you need help in completing this form, please contact the Open Government, Information and Privacy Unit on (02) 9716 2662 or visit our website at https://www.dcj.nsw.gov.au/about-us/gipa/right-to-information-policy.html .			
Please mark relevant boxes with a 🗡 . If you need more room to answer any questions, please include details on a separate page and attach it to this form.			
Are you a Care leaver seeking access to records about your time in out-of-home care? If you grew up in a children's home or in foster care, you may have been in out-of-home care. People who have left out-of-home care are known as "care leavers". Care leavers are entitled to access personal information about themselves regarding their time in care by lodging a request directly with the Care Leaver Records Access Unit, free of charge. For further information, go to https://www.facs.nsw.gov.au/families/out-of-home-care/about-out-of-home-care/were-you-in-out-of-home-care , or alternatively, phone 1300 137 160 or 02 9716 2500.			
Your details Title Mr, Mrs, Ms, Miss, Mx			
Last name or family name			
Given name(s)			
Date of birth	DD / MM / YYYY		
Do you identify as a First Nations person?	Yes No Prefer not to say		
If applicable: Company Name			
Postal Address: Unit/House number	Street/Avenue		
Town/Suburb	Postcode		
Contact number			
Email			
Proof of identity When seeking access to government information, an applicant must provide proof of identity in the form of a copy of any one of the following documents:	Australian Driver Licence Current passport Other - proof of signature and current address details		

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	PERSON / AGENCY TO A	ction ONLY if you are authorising another person to act on your	
Name of person / so your behalf	olicitor/ agency acting on		
	Last name or family name		
	Given name(s)		
Address of person / solicitor/ agency acting on your behalf	Company Name		
	Unit/House number	Street/Avenue	
	Town/Suburb	Postcode	
	Contact number		
	Email		
	Signature of Applicant	×	
	Date	DD / MM / YYYY	
GOVERNMENT INFORMATION			
If applicable:	DCJ reference number:		
Select the type of information ye	type of information you are seeking:	Housing Child Protection	
	0001111191	Ageing/Disability Youth Justice	
		Other (please detail) Corrective Services	
Date range (if applicable) for the records:		from DD / MM / YYYY to DD / MM / YYYY	
Please provide suf	ficient detail below* of the i	nformation you would like to access, to enable us to identify it.	
	r access to information that is a or attach additional information	already held by the agency. You may also wish to provide a reason for n or documentation that you feel will support your claim for access to the	

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PRIVACY STATEMENT

DCJ Privacy Notice

This privacy notice applies to the Department. The Department and its related agencies/divisions comply with NSW privacy legislation when collecting and managing, personal and health information. The information we collect from you (or from an authorised third party) will be held by the Department. Your personal information will be used for the purpose(s) it was collected (for example to provide services to you) or any related, secondary purpose. We may also use your information within the Department as a whole to plan, coordinate and improve the way we provide services. The Department is legally authorised to disclose information to outside bodies in certain circumstances.

Further information about your privacy rights and how you can access your personal information can be found on the Department's Privacy Notice available on the Department's website at: https://www.dcj.nsw.gov.au/statements/privacy.html or by calling: 02 9716 2662.

The Department's Privacy Management Plan (PMP) explains how the Department complies with its obligations under the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002*. The Department's PMP can be found on the Department's website at https://www.dcj.nsw.gov.au/statements/privacy/privacy-management-plan.html

Generally you have the right to access and correct the information if you believe that it is incorrect. If you wish to do so, please contact the Open Government, Information and Privacy Unit at infoamdprivacy@dcj.nsw.gov.au or call 02 9716 2662.

Signature	Full name	
	Applicant's Signature*	×
	Date	DD / MM / YYYY

WHERE DO I LODGE THIS FORM?

You can lodge this form by mailing or emailing it to:

Post

Open Government, Information and Privacy Unit Department of Communities and Justice Locked Bag 5000 PARRAMATTA NSW 2124 Email infoandprivacy@dcj.nsw.gov.au

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^{*} by signing this form, I certify the information provided in this form is true and accurate to the best of my knowledge.