Request correction to your personal information

Privacy and Personal Information Protection Act 1989 (NSW) / Health Records and Information Privacy Act 2002 (NSW)

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| UTS PRIVACY OFFICER, Governance Support Unit — telephone +61 2 9514 1245, email: privacy@uts.edu.au  |

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| **HOW TO REQUEST CORRECTION OF YOUR PERSONAL INFORMATION**: An individual is able to request correction of inaccurate information held about them. You should first contact the UTS business unit that holds your personal information with your correction request. If you do not know which area to contact, or if your request has been denied, you may request changes by completing this form. For more information, see [Your privacy: Amending inaccurate information](https://www.uts.edu.au/about-uts/uts-governance/privacy/your-privacy-uts/amending-inaccurate-information). **WHEN TO USE THIS FORM**: If you do not know which area to contact to correct your information, or your request has been denied, you may request a correction by completing this form, or providing the same details in writing to the Privacy Officer. This form cannot be used if your information can be amended directly by online access or through another business process.**HOW PERSONAL INFORMATION COLLECTED ON THIS FORM WILL BE USED**: The personal information you provide on this form will be used to liaise with you and relevant business units, to locate the information requested and facilitate any approved corrections, and will not be used or disclosed unless necessary for that purpose. Documentation relating to access requests will be retained to satisfy minimum retention requirements under the State Records Act 1998 (NSW).**HOW TO LODGE THIS FORM**: Send your completed form and any supporting documents to: |
| **By post**: UTS Privacy OfficerGovernance Support UnitUniversity of Technology SydneyPO Box 123Broadway NSW 2007 | **In person**: UTS Privacy OfficerGovernance Support UnitLevel 26, Building 1University of Technology Sydney15 Broadway, Ultimo NSW 2007 | **By email**: privacy@uts.edu.auWhere a request is lodged by email it will be expected that you are happy to received return communication by email. |

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| Applicant’s details |
| Applicant’s full name |       |
| Student number (if applicable) |       | Staff number (if applicable) |       |
| Contact details | Postal address:       |
|  |
| Phone:       |
| Email address (optional):       |
| Proof of IdentityNote: to protect privacy, personal information will **not** be changed without proof of your identity. | Please attach a **certified** copy of **one** of the following documents:[ ]  Current Australian driver’s licence or Proof of Age card, or[ ]  Current Australian passport, or[ ]  Other proof of signature and current address details |
| Signature       | Date       |
| APPLICANT’S CORRECTION request  |
| Describe the corrections you requireFurther details can be attached. Further evidence may also be required. |       |
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| Have you already requested the correction of this information? | [ ]  Yes [ ]  No |
| If yes, specify who you made the request to:       |
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