

What agency are you seeking information from?

1 Your Details

Title Mr Mrs Ms Dr

Full name

Contact
Number

Email

Address

Preferred contact method Email Post

Are you lodging this request on behalf of another person?

Yes (go to part 2)

No (go to part 3)

2 - The Applicant's Details

Title Mr Mrs Ms Dr

Full name

Do you have authority to make an FOI request on the applicant's behalf? Please attach a copy of your authority to act.

Yes

No

Part 3 - Documents requested

Please provide an outline as to what documents you are seeking

Do you consent to us contacting third party agencies if necessary in processing your application?

Yes

No

Signature

Date