



Participant Request to Access Personal Information Form – C13

Full name:

Postal address:

Date of birth:

Telephone:

Mobile:

Email:

Proof of identity in seeking access to your personal information, you must provide proof of identify in the form of one of the following:

Driver’s licence

Passport

Birth certificate

Other (please specify)

I am seeking my own personal information; or I am acting as an advocate for a participant who has consented to my acting as their advocate

You must complete Consent to Release Requested Personal Information (page 2 of this form)

Details of information sought

I am seeking access to the following information held by Nesian Point: (complete information on a separate page if necessary)

.....
.....
.....
.....

..... I am seeking the above information for the period: from.....
to.....

Signature and declaration

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

Participant’s (Advocates) signature:

Date:



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I (agent) have attached proof of my identity in the form of a current copy of:

Driver's license Passport Birth certificate Other (please specify)

Consent to Release Requested Personal Information

I

(Name)

.... give Nesian Point (NP) authority to release information so requested, to my advocate

(Name of advocate)

and to make necessary enquiries to access information which is held by NP.

Advocate's phone:

Advocate's email:

Advocate's postal address:

Participant's (Advocates) Signature:

Date: