## REQUEST TO CORRECT PERSONAL INFORMATION



## Office of the Registrar

10215 108 Street NW, Edmonton, Alberta, Canada T5J 1L6 T 780.644.6000 | Toll-free 1.866.534.7218 | info@norquest.ca | www.norquest.ca

## **INSTRUCTIONS**

Submit this form to have NorQuest College correct your personal information which is in the custody and control of the Office of the Registrar Most changes require you to submit current identification. Expired ID will not be accepted. Complete only the relevant sections of the form.

FOR OFFICE USE ONLY		
DATE RECEIVED	ENTERED BY	

REASON FOR SUBMITTING THIS FORM (Che	ck all that apply	1)
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- O My address has changed O My gender has changed
- O My legal name has changed O Other
- O My citizenship status has changed

LEGAL NAME)	FIRST NAME / GIVEN NAME (CURRENT or NEW LEGAL NAME)			
STUDENT ID		DATE OF BIRTH (YYYY/MM/DD)		
STREET ADDRESS		CITY/TOWN		
PROVINCE		COUNTRY		
Reason for Change (Fill out all that apply)				
d: marriage certificate, change of name co	ertificate, birth certificate, or other gover	rnment ID		
	FORMER FIRST NAME			
Proof required: passport, permanent resident card, citizenship document, or proof of status	NEW STATUS IN CANADA			
	GENDER			
OTHER Describe the personal information you wish to update and provide relevant documentation				
	at all that apply)  d: marriage certificate, change of name ce  Proof required: passport, permanent resident card, citizenship document, or proof of status	DATE OF BIRTH (YYYY/MM/DD)  APARTMENT NUMBER  POSTAL CODE  It all that apply)  d: marriage certificate, change of name certificate, birth certificate, or other gover  FORMER FIRST NAME  Proof required: passport, permanent resident card, citizenship document, or proof of status  GENDER		

OH

My Request to Correct Personal Information is under Alberta's Freedom of Information and Protection of Privacy (FOIP) Act (ONLY COMPLETE IF YOUR REQUEST IS UNDER FOIP)

Whose information do you want to correct?

- ☐ Your own personal information (not listed in above section "Reason for change")
- ☐ Another person's information (Please attach proof that you can legally act for the person.)

## Turn over to complete form $\rightarrow$

What personal information needs to be corrected?	
(Please give as much detail as possible. Be sure to give the complete name that is in the records if it is different from the name given above. )	
What correction do you want to make and why?	
(Please attach any documents that support your request.)	
FOR OFFICE USE ONLY	
Requests to Correct Personal Information under FOIP must be sent to the Compliance Office – Centre 108 D147:	Date Compliance Office Received Request: DATE: (YYYY/MM/DD)
☐ YES	
□ NO	
Freedom of Information & Protection of Privacy (FOIP) Notifica	tion Statement
The personal information requested on this form is for the purpose of pauthorized under section 33(c) of Alberta's <i>Freedom of Information an</i> information about the collection and use of this information, contact the Tel. 780.644.6000.	d Privacy Act and will be managed in accordance with the Act. For
STUDENT SIGNATURE	DATE (YYYY/MM/DD)