

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 (Check all that apply)

- My address has changed
- My gender has changed
- My legal name has changed
- Other
- My citizenship status has changed

LAST NAME / SURNAME (CURRENT or NEW LEGAL NAME)		FIRST NAME / GIVEN NAME (CURRENT or NEW LEGAL NAME)	
STUDENT ID		DATE OF BIRTH (YYYY/MM/DD)	
STREET ADDRESS		APARTMENT NUMBER	CITY/TOWN
PROVINCE	POSTAL CODE	COUNTRY	

Reason for Change (Fill out all that apply)

NAME CHANGE	Proof required: marriage certificate, change of name certificate, birth certificate, or other government ID		
FORMER LAST NAME		FORMER FIRST NAME	
CITIZENSHIP STATUS	Proof required: passport, permanent resident card, citizenship document, or proof of status	NEW STATUS IN CANADA	
GENDER	Proof required: government issued ID	GENDER	
OTHER	Describe the personal information you wish to update and provide relevant documentation		

OR

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? <ul style="list-style-type: none"> <input type="checkbox"/> Your own personal information (not listed in above section – "Reason for change") <input type="checkbox"/> Another person's information (Please attach proof that you can legally act for the person.)

Turn over to complete form →

<p>What personal information needs to be corrected?</p> <p>(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.)</p>	
<p>What correction do you want to make and why?</p> <p>(Please attach any documents that support your request.)</p>	

FOR OFFICE USE ONLY	
<p>Requests to Correct Personal Information under FOIP must be sent to the Compliance Office – Centre 108 D147:</p> <p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>	<p>Date Compliance Office Received Request: DATE: (YYYY/MM/DD)</p>

Freedom of Information & Protection of Privacy (FOIP) Notification Statement

The personal information requested on this form is for the purpose of processing your request to correct personal information. Collection is authorized under section 33(c) of Alberta's *Freedom of Information and Privacy Act* and will be managed in accordance with the Act. For information about the collection and use of this information, contact the Compliance Office at 10215 108 Street NW, Edmonton, AB, T5J 1L6, Tel. 780.644.6000.

STUDENT SIGNATURE	DATE (YYYY/MM/DD)
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