

Applicant Use

1. Person makir	ng inquiry:	
Address:		
State:	Postcode:	
Phone (M):		
Phone (H):		
Phone (W):		
E-mail:		
	quiry: Please advise the mate e complaint being made:	erial to which access is sought, the correction that is
purposes of cor Life NSW may h	nsidering my request for accordingly, or to investigate the co	he information in this form will be used for the ess to personal information or records that Positive mplaint that I have made. I am aware that this occessing of my request and/or the resolution of my
Signed:		Date:
Please post to:	Administration Officer Positive Life NSW PO Box 831 Darlinghurst NSW 1300	or email: administration@positivelife.org.au



Office Use Only

3. Record of action taken: Details of material provided (if access was requested), correction/s made, or investigation of complaint:
4. Outcome: Was the applicant satisfied with action taken, or was the complaint resolved?
5. Signature of Administration Officer or person investigating the complaint:
Signed:Date:
6. Acknowledgment by applicant that access has been given (if applicable):
I acknowledge that on (date) I was given access to personal information about me held by Positive Life NSW and the requested correction/s or addition/s have been made.
Signed: Date:
7. Filing of inquiry:
Copy provided to the applicant on (date)
Original on file - personal/membership/other (specify)

The Privacy Commissioner's website contains detailed information on privacy obligations including a copy of the *Privacy Act* and the *Australian Privacy Principles Guidelines*. The URL is http://www.privacy.gov.au/ The Guidelines are at https://www.oaic.gov.au/resources/agencies-and-organisations/app-guidelines/APP guidelines complete version 2 March 2018.pdf These Guidelines set out the standards for collecting, storing, using and disclosing personal information.