

Government Information (Public Access) Act 2009 FORMAL ACCESS APPLICATION

Please complete this form to apply for formal access to government information held by NSW Health Pathology (NSWHP) under the *Government Information (Public Access) Act 2009 (GIPA Act*).

IMPORTANT: this is not the application form to request access to medical records or other information held by hospitals and Local Health Districts. Please contact the relevant Local Health District to apply for hospital medical records. Please visit www.health.nsw.gov.au/lhd to find your Local Health District.

If you require any assistance in completing this form, please contact NSWHP's Right to Information Officer at NSWPATH-GIPA@health.nsw.gov.au or visit www.pathology.health.nsw.gov.au.

1.	Your details		
	Title:		
	First name:		
	Last name:		
	Postal address:		
	Phone number:		
	Email address:		
	Tick the box if you ag	gree to receive correspondence at the above email address.	
	Note: your application will not be considered valid unless it includes an Australian postal address or email address		
	Organisation (if appli	cable):	
	Type of applicant:	Are you a:	
	Member of the public	;	
	Member of the public	: (legal representative)	
	Media		
	Member of Parliamer	nt	
	Not for profit organisa	ation or community group	
	Privacy sector busine	ess	
	Note: the questions below a	are optional and are only for the purposes of providing a better service.	
	Aboriginal or Torres	Strait Islander: Yes / No (circle one)	
	Main language spoke	n:	
	Do you have any spec	cial needs for assistance with this application?	
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2. Government Information

- Your application will not be considered valid unless you provide enough detail to enable NSWHP to clearly identify the information you are seeking.
- Should your application scope be considered too broad, and we consider that it is likely to be a
 diversion of our resources to process, you will be contacted and invited to amend and reduce
 the scope of your application.
- You can only apply for access to information that is currently held by NSWHP at the time the application is received.
- NSWHP cannot be required to create a new document in order to respond to your application but may, if it is more administratively convenient, decide to do so (i.e. create a summary document rather than copy all source documents)

Please describe the information you would like to access:				
Note: if you require more space, please attach additional pages				
In order to minimise processing time and cost to you, you may wish to limit the scope of your application, by clarifying that you are only seeking information such as:				
By date:				
By type:				
By location:				

	Have you applied, at any time, to another age	ncy for similar information:	Yes / No	(circle one)
	If yes, please provide the name of the agency			
3.	Proof of identity			
	Are you seeking access to personal information?	Yes / No (circle one)		
	When seeking access to personal information, an applicant must provide proof of identity inthe form of a <i>certified copy</i> of any one of the following documents:			
	Australian driver's licence	☐ Current Australian pass	port	
	☐ Other identification with photograph, proof of signature and current address details			
	Note: only required when an applicant is requesting their or document has been verified by an authorised Justice of the	•	ertified means	that the ID

4. Third party consent

If the information sought contains information about another person, business or government agency, NSWHP may be required to consult with third parties before deciding your application. The purpose of this consultation is for NSWHP to determine whether the third party has an objection to disclosure of some, or all, of the information being requested. Please indicate whether you consent to your identity as an applicant being disclosed to the involved third party:

Do you consent to this? Yes / No (circle one)

5. Disclosure log

If the information sought is released to you and NSWHP believes it to be of interest to other members of the public, details about your application may be recorded in the agency's 'disclosure log'. This is published on the agency's website. If you object to this, we must first decide if you are entitled to object and if so, whether the objection outweighs the general public interest in including this information in the disclosure log. You can only object to the inclusion of information on an agency's disclosure log for one or more of the following grounds:

- The information includes personal information about you (or a deceased person for whom you are the personal representative)
- The information concerns your business, commercial, professional or financial interests
- The information concerns research that has been, or is being, or is intended to be, carried out by or on your behalf
- The information concerns the affairs of a government of the Commonwealth or another State (and you are entitled to act on behalf of that government agency).

Note: that personal information will not be published on our disclosure log

Do you object to this? **Yes** / **No** (circle one)

	6.	Form of access						
		How do you wish to access the information?						
		☐ Inspect the document(s) ☐ A copy of the document(s)						
		☐ Access in another way (please specify)						
7.	Αį	oplication and processing fees						
	•	Under the GIPA Act, the application fee is \$30.00 which, in a request for personal documents, covers 20 hours of processing.						
	Processing charges for non-personal requests are charged at \$30.00 per hour							
	 If it appears that it will take more than four (4) hours to process your application, we may requadvance deposit of 50% of the estimated processing charges, before continuing with processing charges. 							
	•	The processing time to complete the application stops until payment has been received.						
	I have attached payment of the \$30 application fee by cheque or money order (tick one) made ou NSW Health Pathology							
	[☐ Cheque ☐ Money Order						
		Alternatively, you may make the payment for the fee with a credit card by telephoning NSWHP's Finance Department on 1800 658 216, then select option 1.						
		☐ Credit Card						
	N	ote: please do NOT send cash by post						
	8.	Discount in processing charges						
		You may be asked to pay a charge for processing the application (\$30 / hour). Some applicants may be entitled to a 50% reduction in their processing charges. If you wish to apply for a discount, please indicate the reason:						
		Financial hardship – please attach supporting documentation (eg a pension or Centrelinkcard).						
		AND / OR						
		☐ Special benefit to the public – please specify why below:						
		Applicant's signature:						
		Applicant's signature:						
		Date:						

Please send this form and the application fee to:

NSW Health Pathology Attention: Right to Information Officer PO Box 846 NEWCASTLE NSW 2300

Or email the completed form to: NSWPATH-GIPA@health.nsw.gov.au

General Information for Applicants

- Please try to provide as much detail as you can to help identify the information you are seeking.
- You will be contacted within 5 working days after the application is received to notify you of NSWHP's decision as to the validity of your application.
- Your request will be dealt with as soon as possible and in any case within 20 working days after it is received. However, if NSWHP needs to conduct consultation with other third parties, section 54 of the GIPA Act provides for an additional 10 working days to process the application.
- If the information you seek is more likely to be held by another government agency, your request may be transferred to that agency, and you will be notified.
- A set of tips on how to prepare your GIPA application can be found at https://www.ipc.nsw.gov.au/checklist-tips-framing-your-information-access-application.
- General information about the GIPA Act is available by contacting the NSW Information and Privacy Commission on 1800 472 679 or email at ipcinfo@ipc.nsw.gov.au or at its website
 www.ipc.nsw.gov.au.

Privacy Statement

Under the GIPA Act, you must provide your name and address or email address and a description of the information you are seeking access to.

If you do not provide all the information requested, we may not be able to process your application. Your details will be stored and managed in accordance with the *Privacy and Personal Information Protection Act 1998* and the *State Records Act 1998*.

Your personal information will not be used for any other purpose and will not be given to any third party except where required by law.

Offic	e use only			
Date	Date application received:			
File	reference:			