

Freedom of Information (FOI) Request

To request access to documents from the Victorian Curriculum and Assessment Authority under Section 17 of the *Freedom of Information Act 1982 (Vic)* please complete this form.

Please print clearly and in **CAPITAL LETTERS**.

COLLECTION NOTICE

The Victorian Curriculum and Assessment Authority (VCAA) is a statutory authority continued under the *Education and Training Reform Act 2006 (Vic)*. The VCAA collects the information on this form, which includes personal information within the meaning of the *Privacy and Data Protection Act 2014 (Vic)*, for the purpose of processing your request for information under the *Freedom of Information Act 1982 (Vic)*. The personal information collected may be disclosed in applying relevant provisions of the *Freedom of Information Act 1982 (Vic)*, including but not limited to: (i) transferring the request to other agencies; and (ii) consulting with other parties in relation to the application. The personal information will not otherwise be used or disclosed by the VCAA except with the consent of the individual concerned, or where the VCAA is required or permitted by law to do so. If the requested information is not provided, the VCAA may not be able to process your request. An individual may request access to personal information the VCAA holds about them, if any, and request its correction if inaccurate. To do so, please contact the VCAA on (03) 9032 1629. The VCAA Privacy Policy is available at www.vcaa.vic.edu.au/Pages/aboutus/policies/privacypolicy.aspx

SECTION 1: APPLICANT DETAILS

Title
(Mr, Mrs, Miss, Ms)

Surname

First name

Organisation
(if applicable)

Email

Postal Address
 State **Postcode**

Telephone () **Mobile**

Preferred contact method Telephone Mobile Email Post

Do you need an interpreter? Yes **Language**

Do the documents you are seeking access to relate to you personally? Yes No

If YES, attach a **certified copy of your signed photo identification**. We may not be able to provide access to the requested document(s) if we cannot verify that you are the person who is the subject of the document(s).

SECTION 2: APPLICANT REPRESENTATIVE DETAILS

Complete this section if a representative such as a parent, guardian, lawyer or other person is acting on your behalf.

Surname

First name

Organisation
(if applicable)

Email

Postal Address
 State **Postcode**

Telephone () **Mobile**

Preferred contact method Telephone Mobile Email Post

Relationship to applicant

Attach a **written and signed authority by the applicant** authorising the representative to lodge this request on their behalf and have access to any information concerning the request

Attach **certified copies of applicant's and representative's signed photo identification**.

SECTION 3: REQUEST DETAILS

Please identify or describe the document(s) you are seeking access to; be specific and provide as much information as possible, including what the document(s) relate to, the date range in which the document(s) may have been created, and the type of document (for example an email, report, letter). Please avoid using words such as 'all documents' because that request may be too large for us to process, or it may not be specific enough for us to identify the document(s). If you are not sure how to frame your request, please contact us.

It may be helpful to exclude certain documents or information from your request if they aren't necessary or relevant. This may mean we can process your request faster. Do you require access to:

Draft documents Yes No **Duplicate documents** Yes No
Commercial information relating to third parties Yes No

SECTION 4: EDITED DOCUMENTS

The document(s) you request may contain exempt or irrelevant information. Under section 25 of the FOI Act, we can provide edited copies of document(s) with exempt or irrelevant information removed if it is practicable for us to edit the document(s) and you agree to accept an edited copy of the document(s). If you don't agree to receive an edited copy, we may decide the entire document is exempt and refuse access to it in full, even if part of the document could otherwise be released to you.

Do you agree to receive a copy of document(s) with exempt or irrelevant information removed in accordance with section 25 of the FOI Act?

Yes No

SECTION 5: PERSONAL INFORMATION AND CONSULTATION

If you are seeking access to documents that contain third party personal information (that is, names, addresses, phone numbers or other identifying information) the VCAA must consult with every affected person and ask if they object to the release of their information. This may result in extending the due date for your request by 15 days.

Do you require access to personal information relating to third parties? Yes No

Do you consent to VCAA identifying you as the applicant for the purpose of consultation? Yes No

To assist with consultation, please explain the purpose of your request:

SECTION 6: FORM OF ACCESS TO DOCUMENTS REQUIRED

- Physical** (copies sent by post)
- Electronic** (copies sent by email, where possible)
- Inspection** (personal inspection)

SECTION 7: PAYMENT DETAILS

The application fee for a Freedom of Information request is **\$30.10**. Payment can be made by cheque or money order (payable to the VCAA) or by credit card.

The application fee will be waived for a person holding a valid Pensioner Concession Card or Health Care Card. Please include a certified copy of your concession card with your request. If there is another reason why paying the application fee would cause you hardship, please provide an explanation with your request. We will assess your fee waiver request and let you know the outcome.

Access charges may be payable under the FOI Act. A deposit may be required where charges are estimated to exceed \$50. Charges must be waived in certain circumstances. We will advise you if access charges apply after your request has been assessed.

<input type="checkbox"/>	Cheque or Money Order (payable to the VCAA)	<input type="checkbox"/>	Mastercard	<input type="checkbox"/>	Visa
Card number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Expiry date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
Cardholder's name	<input type="text"/>				
Cardholder's signature	<input type="text"/>			Date	<input type="text"/>

SECTION 8: LODGING YOUR REQUEST

Please send your completed request form and any attachments by email or post.

vcaa.foi@education.vic.gov.au

or

**Freedom of Information Officer
Victorian Curriculum and Assessment Authority
Level 7, 2 Lonsdale Street
Melbourne VIC 3000**