Application for review of conduct under section 53 of the Privacy and Personal Information Protection Act 1998.

Use this form if you wish to make a privacy complaint to the University.

If you need help in filling out this form, please contact the Privacy Officers 9351 4263 or visit our website at www.sydney.edu.au/arms

1. Your details

Surname: ................................................................. Title: Mr/Ms/Dr/Prof  
Other names: ......................................................................................................................  
Postal address: .................................................................................... Postcode: ..............  
Day-time telephone: ............................................... Facsimile: ......................................................  
Email: ......................................................................................................................  

2. Details of the complaint

What is the conduct complained of?

______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  

When did the conduct you are complaining about occur? (Use dates if possible)

______________________________________________________________________________  
______________________________________________________________________________  

When did you become aware of this conduct?

______________________________________________________________________________  
______________________________________________________________________________  

What effect did the conduct have on you or another person?

______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  

(Use continuation sheets if necessary)
What would you like to see the University do about the conduct?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

3. Declaration and signature

I understand that details of my application for review will be referred to the Privacy Commissioner in accordance with section 54(1) of the Privacy and Personal Information Protection Act 1998 and that the Privacy Commissioner will be kept advised of the progress of the review.

Applicant’s signature:          Date:

There is no fee for applications for personal information.

Please post this form to:    Privacy and Right to Information
Archives and Records Management Services
c/- Archives A14
University of Sydney 2006