

# Annex "F"

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FOI Tracking No.



## FREEDOM OF INFORMATION REQUEST FORM (Pursuant to E.O. No. 2, s. 2016)

Please read the following information carefully before proceeding with your application. Use blue or black ink. Write neatly and in BLOCK letters. Improper or incorrectly-filled out forms will not be acted upon. Tick or mark boxes with "X" where necessary. Note: (\*) denotes a MANDATORY field.

### A. Requesting Party

<b>*Given Name</b>		<b>*Surname</b>	
<b>Gender</b>	<b>Age</b>	<b>Landline/Fax No.</b>	<b>*Mobile No.</b>
<b>*Complete (Postal) Address</b>		<b>Email Address</b>	
		<b>*Type of ID Given</b> <input type="checkbox"/> Passport <input type="checkbox"/> Driver's License <input type="checkbox"/> GSIS/SSS ID <input type="checkbox"/> Postal ID <input type="checkbox"/> Voter's ID <input type="checkbox"/> School ID <input type="checkbox"/> Company ID <input type="checkbox"/> Others _____	
<b>*Preferred Mode of Communication</b> <input type="checkbox"/> Landline <input type="checkbox"/> Mobile Number <input type="checkbox"/> Email <input type="checkbox"/> Postal Address		<b>*Preferred Mode of Reply</b> <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Postal Address <input type="checkbox"/> Pick-up at Agency	

### B. Requested Information

<b>*Title of Document/Record Requested</b> <small>(Please be as detailed as possible)</small>	<b>*Date or Period of Document Requested</b> <small>(DD/MM/YYYY)</small>
<b>*Purpose</b>	

### C. Declaration

#### Privacy Notice

Once deemed valid, your information from your application will be used by the agency you have applied to, to deal with your application as set out in the Freedom of Information Executive Order No. 2. If the agency gives you access to a document, or if a document contains no personal content about you, the document will be published online in the agency's disclosure log, along with your name and date you applied, and, if another person, company or body will use or benefit from the documents sought, the name of that person, entity or body.

#### I declare that:

The information provided in this form is complete and correct

- I have read the Privacy Notice
- I have presented at least one (1) government-issued ID to establish proof of my identity
- I understand that it is an offense to give misleading information about my identity, and that doing so may result in a decision to refuse to process my application
- I understand that using the information other than the declared purpose may lead to legal liability.

<b>*Signature</b>	<b>*Date Accomplished</b>
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### D. FOI Receiving Officer (FOR INTERNAL USE ONLY)

<b>Name</b>	<b>Division Assigned</b>
<b>Date Received</b>	<b>Division DM Assigned</b>
<b>Request Recommendation</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>Request Decision</b> <input type="checkbox"/> Successful <input type="checkbox"/> Partially Successful <input type="checkbox"/> Denied
<b>Reason for Denial</b> <input type="checkbox"/> Invalid <input type="checkbox"/> Incomplete <input type="checkbox"/> Data is online	<b>Reason for Partial Success</b>
<b>Proof of ID Presented</b>	
<b>Date Documents Sent</b>	<b>Reason for Denial</b> <input type="checkbox"/> Invalid <input type="checkbox"/> Incomplete <input type="checkbox"/> Data is online
<b>FOI Registry Accomplished</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Exception    Which Exception? _____
<b>FRO Signature</b>	<b>Date Request Finished</b>