



# WESTBANK FIRST NATION

## LEGAL SERVICES DEPARTMENT

Suite 201-515 Highway 97 South, Kelowna, B.C. V1Z 3J2  
Telephone: (250) 769-2446 – Fax: (250) 769-2443

### PRIVACY INCIDENT INVESTIGATION REQUEST

Use this form when raising a concern about the handling of personal information by Westbank First Nation under *Westbank First Nation Freedom of Information and Protection of Privacy Law 2017*.

For the protection of everyone's privacy, we can only accept Privacy Incident Investigation Requests made by the persons involved or an authorized representative. Therefore, if you wish to complain on behalf of another person, please provide proof of authority to do so.

If more space is required, please attach additional pages.

<b>Claimant Information</b>		<i>Protected when submitted</i>		
<b>Surname</b>	<b>First Name</b>	<b>WFN MEMBER</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Cell Phone Number</b>	<b>Home Phone Number</b>	<b>Work Phone Number</b>		
<b>Current Address/Contact</b>	<b>Address</b>	<b>City</b>	<b>Prov.</b>	<b>Postal Code</b>
If you are submitting an investigation request on behalf of someone else: <b>Name of that person</b>				
Please provide proof of your authorization – i.e. written authorization by the individual wishing to make the investigation request. Please submit it with this form.				
<b>What is your relationship to that person?</b>				

### Nature of the Incident

I have reason to believe that one or more of the following has occurred:

- WFN has inappropriately collected my personal information.
- WFN has inappropriately disclosed my personal information.
- WFN has inappropriately used my personal information.
- WFN has inappropriately disposed of my personal information.
- Other – please explain:



## WFN Privacy Incident Investigation Request

### Details of the Incident

Please describe the events or circumstances that led to your concern. Include details such as the names or positions of people involved in the incident, the location where the incident occurred, and any other factors you consider relevant.



# WFN Privacy Incident Investigation Request

## Details of the Complaint (cont'd)

### Resolution

WFN has physical, electronic, and procedural safeguards in place to protect personal information. WFN commits to investigating your concern and informing you of any steps taken, or any steps that will be taken, in the resolution of your concern.

### Privacy Statement

The Legal Services Branch collects the personal information in this form under the authority of the *Westbank First Nation Freedom of Information and Protection of Privacy Law 2018* for the purposes of assessing, investigating and reporting on your privacy concern. The department may collect information about you from other individuals or organizations involved in the complaint for the above purposes.

The department may disclose the information you give us to the individuals or organizations named in the Privacy Incident Investigation Request and, if necessary, to others who have information relevant to your complaint. In case of a challenge to the department's conduct connected with your privacy complaint, the department may need to disclose some of your personal information to the FOIPP Commissioner as part of the FOIPP Complaint Review process.

You are not required to provide the department with your contact details and may make a privacy complaint anonymously. However, if you do not provide your contact details, the department may not be able to properly investigate your complaint or inform you of the action, if any, taken in response to your complaint.

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Signature of Claimant

Date

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Signature of Privacy Officer

Date