

Schedule A: Town of Calmar Privacy Complaint Form
(Protection of Privacy Act – POPA)

Purpose of this Form

This form is used to submit a **privacy complaint** to the Town of Calmar regarding concerns about the collection, use, disclosure, or safeguarding of personal information under the Protection of Privacy Act (POPA).

If you believe your personal information has been mishandled by the Town of Calmar or a service provider acting on its behalf, you may submit a complaint using this form.

Complainant Information

Full Name: _____

Mailing Address: _____

City/Town: _____ Postal Code: _____

Email Address: _____

Phone Number: _____

Preferred method of contact:

Email Phone Mail

Complaint Details

Please describe your privacy concern in as much detail as possible.

Date(s) of incident or concern (if known): _____

Town department or program involved (if known): _____

Description of the concern

(Please include who, what, when, where, and why, if known):

Have you reported this concern previously?

Yes No

If yes, please describe when and to whom:

Supporting Documentation (Optional)

Please list or attach any documents, emails, or other records that support your complaint:

Declaration

I declare that the information provided in this complaint is true and accurate to the best of my knowledge.

Signature: _____

Date: _____

Submission Instructions

Please submit this form by email or mail to:

Chief Administrative Officer / Privacy Officer

Town of Calmar

Email: slosier@calmar.ca

Mailing Address: PO Box 750, 4901-50 Ave,
Calmar, AB T0C 0V0

Privacy Notice (Authority to Collect)

The collection of personal information on this form is authorized under section 4(c) of the **Protection of Privacy Act (POPA)**.

The personal information collected will be used and disclosed only for the purpose of investigating and responding to a privacy complaint, in accordance with POPA.

If you have questions about the collection of your personal information, please contact the Town of Calmar's Privacy Officer.