

FOI File Opening/Closing Worksheet

File Opening Details (complete this section upon opening file)										
File name: _____	File number: _____	Date received: ¹ _____								
Source of request (check one): <input type="checkbox"/> Direct from requestor <input type="checkbox"/> Transferred/forwarded here										
Type of request (check one): <ul style="list-style-type: none"> <input type="checkbox"/> Personal Information Access Request <input type="checkbox"/> General Records Access Request <input type="checkbox"/> Correction and/or Statement of Disagreement → If so, SKIP AHEAD to the bottom of page 2. 										
Source of FOI request / type of requestor (check one): <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"><input type="checkbox"/> Individual/Public</td> <td style="width: 50%; padding: 5px;"><input type="checkbox"/> Association/Group</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Individual by Agent</td> <td style="padding: 5px;"><input type="checkbox"/> Media</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Business</td> <td style="padding: 5px;"><input type="checkbox"/> Government (All Levels)</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Academic/Researcher</td> <td style="padding: 5px;"><input type="checkbox"/> Other</td> </tr> </table>			<input type="checkbox"/> Individual/Public	<input type="checkbox"/> Association/Group	<input type="checkbox"/> Individual by Agent	<input type="checkbox"/> Media	<input type="checkbox"/> Business	<input type="checkbox"/> Government (All Levels)	<input type="checkbox"/> Academic/Researcher	<input type="checkbox"/> Other
<input type="checkbox"/> Individual/Public	<input type="checkbox"/> Association/Group									
<input type="checkbox"/> Individual by Agent	<input type="checkbox"/> Media									
<input type="checkbox"/> Business	<input type="checkbox"/> Government (All Levels)									
<input type="checkbox"/> Academic/Researcher	<input type="checkbox"/> Other									

FOI File Closing Details (to complete upon closing file) Date closed: _____

Reason for closing (check one): Request completed² Transferred/forwarded → **If so, STOP. Worksheet is complete.**

Time taken to complete request (check one):³

- | | |
|--|--|
| <input type="checkbox"/> 30 days or less | <input type="checkbox"/> 61-90 days |
| <input type="checkbox"/> 31-60 days | <input type="checkbox"/> 91 days or longer |

Which of the following were issued for this file (check neither, one, or both as applicable):

- | | |
|--|--|
| <input type="checkbox"/> Notice of Extension | <input type="checkbox"/> Notice of Affected Person |
|--|--|

Was the request completed within the time permitted?⁴

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Disposition of request (check one):

- | | |
|--|---|
| <input type="checkbox"/> All information disclosed | <input type="checkbox"/> No responsive records exist |
| <input type="checkbox"/> Information disclosed in part | <input type="checkbox"/> Request withdrawn, abandoned or non-jurisdictional |
| <input type="checkbox"/> No information disclosed | |

[Worksheet continues on next page]

¹ This is the date on which a valid request was first received. If a valid request was transferred or forwarded here from another institution, this is the date on which the request was first received by the other institution.

² For an access request, “completed” can mean a decision letter issued, or the file was withdrawn, abandoned, or rejected, etc.

³ The time between the issuance of a fee estimate/interim decision letter and the deposit being paid is not included when calculating the number of days to complete a request.

⁴ i.e., within 30 days if neither a notice of extension or a notice of affected person was issued, otherwise, within the time limit permitted under the notice of extension and/or the notice of affected person

Exemptions Applied (check as many as apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> Cabinet Records (s.12) | <input type="checkbox"/> Third Party Information (s.17) | <input type="checkbox"/> Information Soon to be Published (s.22) |
| <input type="checkbox"/> Advice to Government (s.13) | <input type="checkbox"/> Economic and Other Interests of Ontario (s.18) | <input type="checkbox"/> Frivolous or Vexatious (s.27.1) |
| <input type="checkbox"/> Law Enforcement (s.14) (<i>does not include s.14(3)</i>) | <input type="checkbox"/> Information with Respect to Closed Meetings (s.18.1) | <input type="checkbox"/> Personal Information (Requester) (s.49) ⁵ |
| <input type="checkbox"/> Refusal to Confirm or Deny (s.14(3)) | <input type="checkbox"/> Solicitor-Client Privilege (s.19) | <input type="checkbox"/> Act Does Not Apply (s.65) (<i>does not include s.65(6)</i>) |
| <input type="checkbox"/> Civil Remedies Act, 2001 (s.14.1) | <input type="checkbox"/> Danger to Safety or Health (s.20) | <input type="checkbox"/> Labour Relations & Employment. etc. (s. 65(6)) |
| <input type="checkbox"/> Prohibiting Profiting from Recounting Crimes Act, 2002 (s.14.2) | <input type="checkbox"/> Personal Privacy (Third Party) (s.21) ⁶ (<i>does not include s.21(5)</i>) | <input type="checkbox"/> Other Acts (s.67) |
| <input type="checkbox"/> Relations with Other Governments (s.15) | <input type="checkbox"/> Refusal to Confirm or Deny (s.21(5)) | <input type="checkbox"/> PHIPA Section 8(1) applies |
| <input type="checkbox"/> Defence (s.16) | <input type="checkbox"/> Species at risk (s.21.1) | |

Fees:

- | | | |
|-----------------------------|---------------------------------|---------------------------------------|
| Application Fees Collected: | <input type="checkbox"/> \$5.00 | <input type="checkbox"/> Other: _____ |
| Additional Fees Collected: | <input type="checkbox"/> None | <input type="checkbox"/> Other: _____ |
| Fees Waived: | <input type="checkbox"/> None | <input type="checkbox"/> Other: _____ |

Were additional fees collected for any of the following reasons (check as many as apply):

- | | |
|---|--|
| <input type="checkbox"/> Search Time ⁶ | <input type="checkbox"/> Shipping |
| <input type="checkbox"/> Reproduction | <input type="checkbox"/> Computer Costs |
| <input type="checkbox"/> Preparation ⁶ | <input type="checkbox"/> Invoice Costs (and others as permitted) |

For completed corrections and/or statements of disagreement ONLY**Reason for closing (check one):**

Date closed: _____

- | | |
|---|---|
| <input type="checkbox"/> Correction made in whole | <input type="checkbox"/> Correction request refused |
| <input type="checkbox"/> Correction made in part | <input type="checkbox"/> Correction request withdrawn by req. |

Was a statement of disagreement attached to the relevant record? Yes NoNumber of correction/disagreement notifications sent: None Other: _____**[End of worksheet]**⁵ Applies only to personal information access requests (not to general records requests).⁶ Applies only to general records access requests (not to personal information requests).