

Royal Irish Academy
REQUEST FOR ACCESS TO INFORMATION
Freedom of Information Acts 2014

I. DETAILS OF REQUESTER (PLEASE USE BLOCK LETTERS)

First Name:

Surname

Postal Address:

Telephone Number(s):

Home: _____ Business: _____

Mobile: _____ Email Address: _____

2. FORM OF ACCESS

My preferred form of access is: (please tick as appropriate)

To receive photocopies: To inspect the original record:

Other format (Please specify):

3. DETAILS OF REQUEST (please tick as appropriate)

In accordance with the Freedom of Information Act 2014, I request access to records which are: (please tick as appropriate)

Personal

Non-personal

Before you are given access to personal information relating to yourself you may be asked to produce your Birth Certificate, Driving Licence, Passport or other form of identity.

*In the space provided below, please describe the records as fully as you can. If you are requesting **Personal Information**, please state precisely, in whose name those records are held. It is not usual to be given access to personal information of another person unless you have obtained the written consent of that person.*

I request the following records:

PLEASE SIGN HERE _____ DATE: _____

Please send your completed application to:

Freedom of Information Officer
Royal Irish Academy
19 Dawson St., Dublin 2

Telephone: 01 676 2570 E-Mail: foi@ria.ie

For Office Use Only

Date FOI Request Received _____

Identity Verified

Consent Confirmed

Form of Identity Produced:

Birth Certificate

Driving Licence

Passport

Other: _____