

LONDON SCHOOL OF HYGIENE & TROPICAL MEDICINE

FREEDOM OF INFORMATION ACT 2000  
REQUEST FOR INFORMATION FORM



**Your details**

\*Name .....

\*Address .....

.....

Telephone number ..... Fax Number .....

Email .....

**\*Please note that we cannot provide you with the information you require unless you provide these details**

**Description of the information you require:**

Please provide a description of the information you would like the School to provide. If your request relates to specific document(s), please provide any details of the document you may have (e.g. date of production, author etc) and its likely location (e.g. the relevant staff member, office or department). If you are uncertain how to describe the information you require, the relevant individual/unit staff or the Archivist & Records Manager will be happy to provide you with advice and assistance, or direct you to others who can help.

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NB. The London School of Hygiene & Tropical Medicine has the right to ask for clarification of any request for information where it does not prove possible to identify the information needed from the original description provided.

**Format of information**

Where your request covers information that is already published by the School, we will provide you with directions on how to locate the appropriate information in its usual published format.

Otherwise, we can provide you with (please tick your preference):

? the opportunity to view the information by appointment with the Archivist & Records Manager

? the information in 'permanent' form (e.g. photocopies of the relevant information, or electronic document sent via email)

? the information in summary/ 'digest' form (available only if the information is in a format that can be summarised coherently and in reasonable time)

Some other form (please specify).....

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**Notes**

(i) Though there is no limit to the scope of the information you may request, please note that the School may have the right to refuse vexatious requests (under the terms of Section 14 of the Freedom of Information Act 2000), to obscure or suppress information that relates to other third parties (under the terms of Principles 1, 6 and 7 of the Data Protection Act 1998) and to not disclose information that is covered by relevant exemptions allowed by the Freedom of Information Act 2000.

(ii) If your request is refused or is only answered partially, a full explanation for our decision will be provided. You will be entitled to appeal to the School, and contact details will be provided. You will also be provided with details of how to make an external appeal to the Office of the Information Commissioner.

(iii) In cases where the School holds only some of the information requested, we will respond as fully as we can. Should we need to redirect an enquiry to some other public body you will be informed of this immediately.

**Office use only**

Request received: .....

Search Fee: £..... Date fee set:..... Date fee received:.....

Clarification requested (date)..... Clarification received (date).....

(please append relevant correspondence)

**Notes** (NB.If request is *refused*, attach all relevant correspondence).....

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Date completed: ..... Confirmed (signature).....

Please send the completed form to the relevant individual/unit if known; alternatively forms can be sent to: The Archivist & Records Manager, London School of Hygiene & Tropical Medicine, Keppel Street, London, WC1E 7HT, [foi@lshtm.ac.uk](mailto:foi@lshtm.ac.uk). If you require advice in composing your request, please contact the Archivist & Records Manager.