

Request for Personal Information to be Classified as Private

use for at-risk employees to request private classification of personal information

Note: Utah Code § 63G-2-303(2) provides that at-risk employees may file written application with governmental entities requesting the private classification of any personal information the entity has about them or their family members. Personal information is defined in Utah Code § 63G-2-303(1)(a). Utah Code § 63G-2-303(1)(a)(b) defines “at-risk-employee” and “family member.”

Requester’s information:

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip code: _____

Daytime telephone number: _____ Email address: _____

Request made to:

Government agency or office holding information: _____

Address: _____

City: _____ State: Utah Zip code: _____

Request:

As a qualified at-risk employee (63G-2-303(1)(a)), I hereby request to classify as private all personal information it maintains about me.

I further request the private classification of personal information related to the following family member(s) who live with me. The name(s) of family member(s) (spouse, child, sibling, parent or grandparent) whose personal information is also requested to be classified as private:

Information to be classified as private includes the following:

- | | |
|------------------------|------------------------------|
| home address | home phone number |
| personal email address | personal mobile phone number |
| pager number | payroll deductions |
| marital status | insurance coverage |
| Social Security number | |

In making this request, I understand that this private classification may affect my ability to receive official announcements and notifications from this office.

Signature: _____ Date: _____

Note: Utah Code § [63G-2-303\(2\)\(d\)](#) requires the form submitted by an at-risk employee to include the signature of the highest ranking elected or appointed official in the employee's chain of command certifying that the employee qualifies as an at-risk employee.

I, the undersigned, certify that the employee whose name appears on this form qualifies as an at-risk employee as defined in Utah Code § [63G-2-303\(1\)\(a\)](#), and that I am his highest commanding officer.

Signature of highest commanding officer

Date

Note: Utah Code § [63G-2-303\(6\)\(a\)\(b\)](#), states the requested private classification shall be in effect for four years after the date on the form, or until one year after the agency receives official notice of the employee's death. The employee may rescind this request at any time.

Office use only

Name of person processing this request: _____

Date action taken to restrict access to information as private: _____