## Subject Access Request Form

**Section 1**

About yourself or person you are making this request on behalf of (Please use block capitals and black ink) – this information will help us to identify the personal data that we may hold about you.

|  |  |
| --- | --- |
| Title (Mr /Mrs /Miss /Ms /Dr /Rev etc) |  |

|  |  |
| --- | --- |
| Surname/Family Name |  |
| First Name(s) |  |
| Maiden/Former Name(s) (if applicable) |  |

|  |  |
| --- | --- |
| Date of Birth (dd/mm/yyyy) |  |

|  |  |
| --- | --- |
| Home Address (Include Postcode) |  |

This is the address to which all replies will be sent, unless you specify otherwise.

|  |  |
| --- | --- |
| **Name of person making request on behalf of data subject (if applicable)** | |
| Surname/Family Name |  |
| First Name(s) |  |
| Relationship to data subject |  |
| Preferred alternative address for correspondence (if applicable) |  |

|  |  |
| --- | --- |
| Contact telephone number |  |
| Contact e mail address |  |

**Section 2- About your request**

What records that you believe we hold would you like access to:

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| --- |
|  |

|  |  |
| --- | --- |
| Have you made a request for this information before? (Yes/No) |  |
| If Yes, could you please provide date of request? (dd/mm/yyyy) |  |

|  |
| --- |
| Where do you want to view your information?  For example, in person, or be sent a paper copy to your home or alternative address or be sent a copy in a specific electronic format to an e mail address  (if this is your preferred option we would encrypt the file to keep it secure) |
|  |
| Do you need any other help with this request? (Please specify below) |
|  |