

**SUBJECT ACCESS REQUEST FORM**

**Part 1 – The Request**

Please complete in **BLOCK CAPITALS**

I am the person the information is about **if yes, please tick and then complete**

**Parts 3, 4, 5 and 6**

**OR**

I am acting on behalf of someone else **if yes, please tick and then complete**

 **Parts 2, 3, 4, 5 and 6**

**Part 2 – The information requested is about someone else**

I am the Data Subject’s parent I enclose proof of parental responsibility

I am the Data Subject’s guardian/carer I enclose proof

Other I enclose consent to share signed by the Data Subject

please state …………………………………………….….

If you are requesting information of behalf of someone else, please give **YOUR** details below

Full Name ………………………………….. Relationship to Data Subject ……….………………

Address ………………………………………………………………………………………………….

Daytime Telephone Number …………………..… Email Address (optional)……………….…...........

**Part 3 – Data Subject - Person that the information relates to**

Title …… Surname ………………………………... First Name ………………………………….

Student number: ……………………………………………………………………..

Date of birth …………………………. :

Current Address ………………………………………………………………………………………..

Post Code …………………………

Telephone Number. ……………………… Email Address ……………………………...

**Identification Documents - please select one from each section**

Section 1 – **proof of identity**

Passport

Driving Licence

Other please state ………………………….

Section 2 – **proof of address**

Bank Statement

Utility Bill

Other please state ………………………………..

**Part 4 – Details of the information being requested**

Please help us deal with your request quickly and efficiently by giving as much detail as possible about the information you want.

**Part 5 – Access to the Information**

All information is provided in an encrypted format, or by registered post, unless specified otherwise. If you have learning disabilities or who are hearing impaired or who have other disabilities and may struggle to access your information in this format, then please let us know. We can seek to provide you with this information in another format.

…………………………………………………………………………………………………….

**Part 6 – Declaration**

I certify the information provided on this form is true. I understand Askham Bryan College is not obliged to comply with my request unless they are supplied with such information as they may reasonably require in order to satisfy themselves as to my identity and to locate the information which I seek.

Name ……………………………….. Signature …………………………….. Date ……..........