HONOUR BELIEVE DETERMINATION PREPARING FOR A BRIGHT FUTURE WITH INNOVATIVE AND EXCITING LEARNING

Subject Access Request Form Appendix M of Data Protection & Information Management Policy

Previous Surname (if app):

The following information is needed to help us give you an accurate response to your enquiry as quickly as possible. If you are completing this form by hand, please complete the form in block capitals using black ink. By law we must respond to you within 1 month of receiving this completed form and proofs of identity.

Details of the person (Data Subject) Please print clearly in ink

Parent / Carer Surname:

Parent First Names:			
Home Address:	Postcode:		
Telephone (daytime):	Email (if avail.):		
Please only complete one of the follow	ing 5 sections		
Current Pupil			
Pupil Name:	Pupil Surname :		
Parent First Names:	Date of Birth:		
Year Group:			
Class:			
Former Pupil			
Pupil Name:	Pupil Surname :		
Parent First Names:	Date of Birth:		
Year Group when left:			
Class when left:			
Last home address when			
enrolled at this school:			

Job Title:	Date of Birth:		
Employee Number (if known)			
Name when employed by school:			
Previous Address if different from cu	current:		
Other Person with connection to the	the School		
Please give details if you have another			
connection with the school. e.g.			
Applicant for employment, Student Applicant, Customer, Supplier,			
Consultant, Referee etc.			
On Behalf of Other Person (not child)			
Relationship to data subject: Your relationship with the Data Subject:			
Please note that if you are acting on behalf of the Data Subject, the School requires evidence of the Data Subject's identity, their written authority, and evidence of your			
identity.			
Full name:			
Address:			
	Postcode:		
Telephone (daytime):			
Signed:	Date:		

Pupil Surname :

Current or Former Staff Member

Date of leaving if left:

What data do you wish to access?

Please specify or describe the document(s) you wish to access, e.g. "emails identifying me relating to a particular issue between September and November 2016"

Documents:	
Over what time	

Please tick below the sections/departments where the documents that you are seeking may be found:

Ch	ecklist of documents that must accompany this request?	
1	Completion of Sections 1, 2 & 4 of the request form	
2	Evidence of your identity*	
3	If you, as the requester, are not the Data Subject:	
5	Completion of Section 3 of the request form	
6	Written evidence of the Data Subject's consent to disclose information to you	
drivir	dence of identity can be a copy of: current password, Current UK or EEA photo on glicense, original birth certificate, National identity card bearing a photograph equestor.	

Consent from Data Subject (to be completed by data subject, if applicable)

Under the terms of the General Data Protection Regulation, I, the data subject of the above described Subject Access Request and give my full and lawful consent for the release of the personal data requested to the named agent above. I am satisfied that they are acting in my best interests and have at no point been coerced into signing this declaration by the named agent or others on behalf of said agent.

I reserve my right at any point to withdraw this declaration and thus halt the transfer of personal data to the agent from the Minster Nursery & Infant School. However, I am fully aware that after the release of information I am unable to evoke my right to retract this declaration.

Signed:	Date:		
Full name:			
the release of information I am unable to evoke my right to retract this declaration.			

OFFICE USE ONLY

Identity Check – Data Subject and Agent (if applicable) 1 form of photo identification and 1 proof of address for both Data Subject and Agent					
Birth Certificate		Passport		Driver's Licence	
Proof of Address		Other			
Consent of					
Agent					
Verified by:			Date:		
Request Number:					

Officer Present at Identity Viewing	
Name:	
Post:	
Signed:	Date: