**General Data Protection Regulations 2018**

**Subject Access Request Form**

The General Data Protection Regulations (GDPR) 2018 provides you, the data subject, with a right to receive a copy of the personal data/information we hold about you or to authorise someone to act on your behalf.

Please complete this form if you wish to receive your personal data. You will also need to provide **proof of your identity**. Your request will be processed within 1 month upon receipt of a fully completed form and proof of identity.

**Proof of identity:**

We require proof of your identity before we can disclose personal data. Proof of your identity should include a copy of **two** documents such as your birth certificate, passport, driving licence, official letter addressed to you at your address e.g. bank statement, recent utilities bill or council tax bill. If you have changed your name, please supply relevant documents evidencing the change.

**Section1**

Please fill in your details as the data subject. If you are not the data subject and you are applying on behalf of someone else over the age of 18 years, please indicate as requested and complete Section 2.

Please tick:

|  |  |
| --- | --- |
| I am the data subject |  |
| I am acting on behalf of the data subject (another living adult) |  |

**Data Subject Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title** | Mr: | Mrs | Ms | Miss | Other |
| **Surname/ Family Name** | |  | | | |
| **First Name(s)/Forenames** | |  | | | |
| **Date of Birth** | |  | | | |
| **Address** | |  | | | |
| **Postcode** | |  | | | |
| **Day Time Telephone Number(s):** | |  | | | |
| **Email address:** | |  | | | |

|  |  |  |
| --- | --- | --- |
| **Previous Addresses:** | | |
| Last Address: | Previous Address 1. | Previous Address 2. |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | | **Please tick and provide 2 forms of proof of identity (ID), one to be a photo ID** |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Passport |  | Driving Licence |  | Other form of photo ID |  | | Birth certificate |  | Utility Bill |  | Official letter |  | |

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| --- |
| **Personal Information**  If you only want to know what information is held in specific records, please indicate in the box below.  Please tell us if you know in which capacity the information is being held, together with any names of officers or dates you may have. If you do not know the name of the team or service, just tell us what you do know. If you do not know exact dates, please give the year(s) that you think may be relevant. |
| **Details:** |

|  |  |
| --- | --- |
| |  | | --- | | **Employment records**  If you are now, or have been employed by Ealing Council and are seeking personal information in relation to your employment please provide details of your employee number/dates of employment, job title(s). | |
| **Details:** |

**Section 2**

Please complete this section of the form with your details if you are acting on behalf of someone else (i.e. the data subject).

If you are **NOT** the data subject, but a representative acting on their behalf, you will need to provide evidence of your identity as well as that of the data subject and proof of your right to act on their behalf.

|  |  |
| --- | --- |
| **What is your relationship to the data subject?**  **(e.g. parent, carer, legal representative)** |  |
| **Name:** | |
| **Address:** | |
| **Contact details:** | |

I am enclosing the following copy as proof of legal authorisation to act on behalf of the data subject:

|  |  |
| --- | --- |
| **Signed letter of authority / consent** |  |
| **Lasting or Enduring Power of Attorney** |  |
| **Evidence of parental responsibility of adult without capacity** |  |
| **Other (give details):** |  |

|  |  |
| --- | --- |
| **Data Subject Declaration:**  I certify that the information provided on this form is correct to the best of my knowledge and that I  am the person to whom it relates. I understand that Ealing Council is obliged to confirm proof of  identity/authority and it may be necessary to obtain further information in order to comply with this  subject access request. | |
| **Name:** | |
| **Signature:** | **Date:** |
| **OR** | |
| **Authorised person – Declaration (if applicable):**  I confirm that I am legally authorised to act on behalf of the data subject. I understand that  Ealing Council is obliged to confirm proof of identity/authority and it may be necessary to obtain  further information in order to comply with this subject access request. | |
| **Name:** | |
| **Signature:** | **Date:** |
|  | |
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| **Warning:** a person who unlawfully obtains or attempts to obtain data is guilty of a criminal offence and is liable to prosecution. |

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| |  | | --- | | **Please choose 1 option**.  I wish to:  Receive the information via email  *(This will be sent via the Council’s encrypted solution for email. Some files may be too large to transmit electronically and we may have to supply in hardcopy)*  Receive the information by post\*  Collect the information in person  \*Please be aware that if you wish us to post the information to you, we will take every care to ensure that it is addressed correctly. However, we cannot be held liable if the information is lost in the post or incorrectly delivered or opened by someone else in your household. Loss or incorrect delivery may cause you embarrassment or harm if the information is 'sensitive'. | |

Please send your completed form and proof of identity to:

Data Protection Team

Ealing Council

14-16 Uxbridge Road

Ealing, W5 2HL

[dataprotection@ealing.gov.uk](mailto:dataprotection@ealing.gov.uk)