**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, one to be photo identity such as a passport, driving licence or freedom pass. The second document to provide proof of address such as a 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:** | |  | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | | **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 |  | |

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

**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, please provide written authority to do so.

|  |  |
| --- | --- |
| **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):** |  |

|  |
| --- |
| **Personal Information Request**  Please indicate in the box below the information you are requesting.  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 in your request.  If the information is about a child, please provide their full names and date of birth.  Please confirm whether you have parental responsibility for the child |
| **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:** |

|  |  |
| --- | --- |
| **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:** |
| **Please Note:** a person who unlawfully obtains or attempts to obtain data is guilty of a criminal offence and is liable to prosecution. | |

**Subject Access Information Disclosure**

The subject access request disclosure will be made electronically via a secure email link.

|  |
| --- |
| Please confirm your email address here: |

Please send your completed form and proof of identity to:

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