



SUBJECT ACCESS REQUEST (FORM)

Please complete the following form and return it to the school office.

A) Data Subject Details

| | |
|--|--|
| Title | |
| Surname | |
| First Name(s) | |
| Current Address | |
| Telephone (Home) | |
| Telephone (Work) | |
| Telephone (Mobile) | |
| Email address | |
| Date of birth | |
| Details of identification provided to confirm name of data subject in question | |
| Details of data requested | |

If the person requesting the information is NOT the data subject, complete the below:

| | | |
|--|-----|----|
| Are you acting on behalf of the data subject with their written consent or in another legal authority? | Yes | No |
| If 'Yes' please state your relationship with the data subject (e.g. parent, legal guardian or solicitor) | | |

| | | |
|---|-----|----|
| Has proof been provided to confirm you are legally authorised to obtain the information? (e.g. letter of authority) | Yes | No |
|---|-----|----|

If you are a parent, we expect to be provided with proof of parental responsibility before releasing personal data of your child.

| | |
|--------------------|--|
| Title | |
| Surname | |
| First Name(s) | |
| Current Address | |
| Telephone (Home) | |
| Telephone (Work) | |
| Telephone (Mobile) | |
| Email address | |

B) Declaration

I hereby request that Arley Primary/Clifford Bridge/Frederick Bird/Hearsall Community/Stockingford/Walsgrave CE/Whittle Academy provide me with the information about the data subject above.

Name _____

Signature: _____

Date: _____

A paper copy can be obtained from our School Offices