



Personal Information - Subject Access Request Form

Your Name

Home Address

.....

.....

.....

Contact No.

Email address

Any other names you are/were known by

(if relevant)

Name of person whose records you want to see **(if different from above)**

.....

Address if different from above

.....

.....

.....

Contact No

Email address

Any other names the person is/was known by

.....

Are you (or the person whose records you want to see) **currently** in contact with the school?

Yes

No

If **yes**, what is the name and address of the person you are in contact with?

.....
.....
.....
.....
.....
.....

If **no**, please can you give us details of where you* lived when you were in contact with the school:

.....
.....
.....
.....
.....
.....

*or the person whose records you want to see

I would like

a copy of my information to be sent to my address by ordinary post

to come in and view/collect my information/file with a staff member present if appropriate

my information emailed to me*. My email address is



* The school takes no responsibility for personal information transmitted via email, as this is not a completely secure method of exchange/transfer. Paper files will be scanned and sent electronically.

Declaration

I wish to see my own records and enclose a copy/s of appropriate identification*

- * Please be aware you will be required to produce one of the following as **proof of identity** before we will proceed with your request

Current Passport (or photocopy)

Current Driving Licence (or photocopy)

A combination of two different utility bills and/or bank statements no more than 3 months old

Verification by a school officer who has been working with you (this will be recorded on your file)

Signed

Date

If you are acting on behalf of another person please complete the relevant Section of the attached Proof of Consent Form:

Complete **Section A** if you are acting on behalf of someone else **OR**

Complete **Section B** if you are acting on behalf of a child under 12 or an adult who lacks capacity;

OR Complete **Section C** if you are a legal representative

Proof of Consent Form (Subject Access Request)

One section of this form must be completed if you are undertaking a subject access request on behalf of someone else.

Section A

To be completed when acting on behalf of an adult or young person

I am undertaking this subject access request on behalf of:

.....
(Insert name of individual whose personal information you wish to see)

My relationship to them is:

.....
(e.g. partner, parent, legal guardian, main carer, advocate, etc.)

I enclose the following form of identification:

.....
.....
(e.g. copy of your passport, driving licence, combination of utility bills and/or bank statements)

Declaration

I, the data subject, confirm that I am happy for

.....

to undertake this subject access request on my behalf

Signed

Date.....

If you are carrying out a Subject Access Request on behalf of a child of 12 or over, they will need to sign the above declaration to confirm they are happy for you to act on their behalf.

Section B

To be completed when acting on behalf of a child **under** 12, **or** an adult who lacks capacity

I am undertaking this subject access request on behalf of:

.....
(Insert name of individual whose personal information you wish to see)

My relationship to them is:

.....
(e.g. parent, legal guardian, main carer, advocate etc.)

I enclose either a copy of

their birth certificate to confirm they are under 12 years

or

my personal Welfare Power of Attorney for the subject

I enclose the following form of identification:

.....
.....
(e.g. copy of your passport, driving licence, combination of utility bills and/or bank statements)

Declaration

I confirm I am the subject's main carer.

Signed

Date

Section C

If you are a legal representative undertaking a subject access request on behalf of a client, they will need to complete this section on the form to show they are happy for you to do this.

.....
(Insert the name of the legal representative)

of
..... (Insert the name of the legal firm)

has permission to undertake this subject access request on my behalf. I also enclose a copy of the following form of ID to confirm my identity as the subject

.....

.....
(e.g. copy of your passport, driving licence, combination of utility bills and/or bank statements)

Name

Signed.....

Date

Please return the completed form and documents to:

St. Anne's Catholic High School for Girls

Attn: Leslie Boodram

6 Oakthorpe Rd

London, N13 5TY

or

boodraml@st-annes.enfield.sch.uk

On receipt of this form and suitable ID, we will respond to you within 1 calendar month.