

1.0 Individual Rights

Which Individual Right are you wishing to exercise? (please tick)

- | | |
|---|---|
| <input type="checkbox"/> The Right of Access | <input type="checkbox"/> The Right to Restrict Processing |
| <input type="checkbox"/> The Right to Rectification | <input type="checkbox"/> The Right to Data Portability |
| <input type="checkbox"/> The Right to Erasure | <input type="checkbox"/> The Right to Object |

2.0 Identity

As a data subject you may be required to supply a photocopy of your proof of identity, such as passport, driving licence or College ID card. If this is the case, we will notify you in writing of the requirement.

If you are requesting personal data on behalf of a data subject you must describe your relationship to the data subject and supply written signed authority of the data subject. We may request a photocopy of proof of the data subject’s identity with this form, such as passport, driving licence or College ID card. If this is the case we will notify you in writing of this requirement.

3.0 Personal Details of Subject

Title:	Forename(s):	Surname:
Any previous name known to the Organisation:		
Date of birth:	Current telephone number:	
Current address:	Current email address:	
Relationship to the organisation:	Start and end dates of employment/ education at the Organisation:	
Detailed description of the Individual Right you are wishing to exercise <i>(e.g. change of contact details, prevent usage of a photograph, confirmation of courses studied/qualifications gained at the Organisation, all data we hold on you)</i>		
Any other information that could help identify your personal data <i>(please give as much detail as possible for example ‘minutes of the meeting where the decision to do x was made’ rather than ‘everything you have about x’. This will help us find the information that you require).</i>		

4.0 Alternative Contact Details (third parties only)

If you are a third party requesting personal data on behalf of the subject, please supply your contact details and describe your relationship to the subject:

Title:	Forename(s):	Surname:
Address:	Telephone number	
	Email address	
Relationship to subject		

5.0 Declaration

I certify that the information provided in this form is accurate to the best of my knowledge. I accept that the Organisation will take reasonable steps to establish identity prior to release of personal data.

I request that the Organisation provide me with a copy of personal data relating to the subject named in Section 3 of this form.

I enclose the following:

- A photocopy of the data subject's proof of identity (if applicable)
- Written and signed authority of the subject (if applicable) – **third parties only**

Signed	Please print name	Date
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<p>Please send completed forms to:</p> <p>Data Protection Officer Bishop Auckland College Woodhouse Lane Bishop Auckland County Durham DL14 6JZ</p> <p>Email: DPO@bacoll.ac.uk</p>	<p>How would you like the information to be released to you? (please tick)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Hard copy (by post) <input type="checkbox"/> Electronic copy – encrypted pdf. <input type="checkbox"/> Electronic copy – USB stick (please provide USB stick) <input type="checkbox"/> Collect in person
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6.0 Retention of your data

Records documenting enquiries made under the Data Protection Act 2018, in regards to Data Subject Individual Rights, will be retained by the Organisation, along with the responses provided, for the current academic year, plus 2 years.