

Subject Access Number (Office Use Only)



Data Protection Act – Subject Access Request Form



The Data Protection Act 1998 provides you, the data subject, with a right to receive a copy of the information we hold about you. Please complete this form if you wish to access your data. You will need to provide evidence of identity and a payment of **£10** to enable the processing to start. Your request will be processed within 40 days of receipt of a fully completed form. If the information contains details of another person we may need to seek their consent before we can provide that information to you. **Please note that if your personal information is held by a school, you will need to apply to that school directly.**

Your Details (The Data Subject)

Title (please tick)	Mr	Mrs	Miss	Ms	Other
Surname/Family Name					
First Names					
Former/Maiden Names					
Date of Birth					
Address					
Post Code					
Previous Addresses (You need only include ones that are relevant to this Council)					
Daytime Telephone Number					

Proof of Identity

We require proof of your identity before we can disclose personal data. Please provide a copy of recent correspondence giving your name and address, eg, a recent utility bill, a driving licence or passport. If you are **NOT** the data subject, but an agent appointed on their behalf, you will **also** need to provide evidence of your identity as well as that of the data subject.

Personal Information

Using the box below, state in your own words why you believe Hampshire County Council is holding your personal information (using a separate piece of paper if necessary). If possible, please indicate in which department it is being held, together with any names or dates you may have (*if you do not know the exact dates, please give the year(s) that you think processing took place*). The Information Commissioner has stated that as much information as possible should be provided to assist with tracing your records.

What personal information do you wish to access (please tick)?			
Occupational Health Records		Personnel Records	Other
Details			

Declaration

This form must be signed by both you (the data subject) and your agent if applicable.

I confirm that the information I have supplied is correct and that I am the person to whom it relates.

Data Subject's Signature

Date

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I confirm that I am authorised to act on behalf of the data subject and that their personal information will be disclosed to them through me.

Agent's Signature

Date

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Please ensure you have enclosed -

£10 fee (cheques or postal orders made payable to *Hampshire County Council*)
Evidence of Identity **Signed Form**

Please return to *Data Protection Officer, Hampshire County Council, Chief Executive's Department, Elizabeth II Court, Winchester, Hants, SO23 8UJ*