**Hedon Primary School**

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| **REQUEST FOR PERSONAL INFORMATION – SUBJECT ACCESS REQUEST (SAR)** | |
| **Return Address:** Data Protection Officer  Denise Winter  Hedon Primary School  Ketwell Lane  Hull  HU12 8BN | **Contact details:**  Email: d.winter@hedonprimaryschool.co.uk  Telephone: 01482 899327 |

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| **Section 1 – Your Details** |
| Please provide the following details about yourself. |
| Full Name: |
| Any Previous Names: |
| Date of Birth: |
| Address: |
| Postcode: |
| Contact Number: |
| Email: |
| The details provided above will be used to communicate with you about your request. The default communication method is email. Please indicate your preferred method for receiving your completed request:  Post  Email  If you are requesting information about yourself you will need to complete **section 3**. If you are requesting information about someone else you will need to complete **sections 2 and 3**.  The school must be confident of your identity before any information can be released. The simplest way of achieving this is to provide us with two proofs of identity. This would apply to you and anyone you are requesting information on behalf of - for example a passport, driving licence.  If you are requesting your child’s information you will need to supply evidence of parental responsibility e.g. your child’s birth certificate.  Originals are not required, any copies must be of good quality, and the school office can take authenticated copies to assist in making any request. |

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| **Section 2 – Other Persons Details** | |
| If different from section 1 please provide details of person you are requesting on behalf of. | |
| Full name: | |
| Any Previous Names: | |
| Date of Birth: | |
| Address: | |
| Postcode: | |
| Please explain briefly why you are requesting the information on their behalf: | |
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| I give consent for the person named in **Section 1** to request and receive my personal information as outlined on this form. I understand that the information and identification supplied will be used to locate the information requested and confirm my identity.  Consent from children under the age of 12 is not normally required - you must however have evidence of parental responsibility. | |
| Signed: | Date: |
| Print Name: | |
| *\* Please use additional page provided if you are requesting information on behalf of more than one person* | |

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| **Section 3 – Requested Information** |
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| **Section 4 - Declaration** | |
| I have included the following with this form | |
| Evidence of identity for the applicant in Section 1 | |
| If applicable, evidence of identity for anyone listed in section 2, or proof of parental responsibility if a child is under the age of 12 | |
| I confirm that the information given on this form is correct. I understand that the school has a legal obligation to use this information to locate and provide access to my personal information. This information will not be shared with any other organisation without your permission. It will be held in the UK and retained in line with the schools published retention schedule. For more information and or for details of what to do if you are unhappy about how we deal with your request, please visit https://hedonprimaryschool.co.uk/parents-2/policies-and-statements/ | |
| Signed: | Date: |
| Print Name: | |

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| **\* SECTION 2 – OTHER PERSONS DETAILS (ADDITIONAL PAGE)** | |
| If different from section 1 please provide details of person you are requesting on behalf of. | |
| Full name: | |
| Any Previous Names: | |
| Date of Birth: | |
| Address: | |
| Postcode: | |
| Please explain briefly why you are requesting the information on their behalf: | |
|  | |
| I give consent for the person named in **Section 1** to request and receive my personal information as outlined on this form. I understand that the information and identification supplied will be used to locate the information requested and confirm my identity.  Consent from children under the age of 12 is not normally required - you must however have evidence of parental responsibility. | |
| Signed: | Date: |
| Print Name: | |
| *\* Please use additional page provided if you are requesting information on behalf of more than one person* | |