

# SUBJECT ACCESS REQUEST (RECORD)

Reference: GDPR SAR  
Issue No: 1  
Issue Date: 16th May  
2018  
Page: 1 of 3

## 1. DATA SUBJECT DETAILS:

<b>Title</b>	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other: <input type="checkbox"/>
<b>Surname</b>					Student\Staff ID, if applicable
<b>First name(s)</b>					
<b>Current address</b>					
<b>Home Telephone</b>					
<b>Work Telephone</b>					
<b>Mobile Telephone</b>					
<b>Email address</b>					
<b>Date of birth</b>					
<b>Details of identification provided to confirm name of data subject:</b>	We will need two copies of forms of identification, which can be: <ul style="list-style-type: none"><li>• Passport</li><li>• Driving licence</li><li>• Birth certificate</li><li>• Utility bill (from last 3 months)</li><li>• Current vehicle registration document</li><li>• Bank statement (from last 3 months)</li><li>• Rent book (from last 3 months).</li></ul>				
<b>Details of data requested:</b>					

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## 1.1 DETAILS OF PERSON REQUESTING THE INFORMATION (if not the data subject):

Are you acting on behalf of the data subject with their <i>[written]</i> or other legal authority?		Yes <input type="checkbox"/>			
		No <input type="checkbox"/>			
If 'Yes' please state your relationship with the data subject (e.g. parent, legal guardian or solicitor)					
<b>Please enclose proof that you are legally authorised to obtain this information.</b>					
<b>Title</b>	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other: <input type="checkbox"/>
<b>Surname</b>					
<b>First name(s)</b>					
<b>Current address</b>					
<b>Address continued</b>					
<b>Home Telephone</b>					
<b>Work Telephone</b>					
<b>Mobile Telephone</b>					
<b>Email address</b>					

## 2. DECLARATION

I, ....., the undersigned and the person identified in (1) above, hereby request that South Essex College provide me with the data about me identified above.

Signature:

Date:

SAR form completed by (student / employee name):

I, ....., the undersigned and the person identified in (1.1) above, hereby request that South Essex College provide me with the data about the data subject identified in (1) above.

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Signature:

Date:

SAR form completed by (student /employee name):

This form must immediately be forwarded to South Essex College's Data Protection Officer / GDPR Owner.