

## **DATA PROTECTION ACT 2018 – SUBJECT ACCESS REQUEST FORM**

### **Details of person requesting the information:**

Full Name: .....

Company Name: (if applicable).....

Address: .....

.....

Tel No: .....

Email: .....

**Please state your relationship with University College Birmingham (“UCB”), e.g. student, employee or other (if other, please state specific relationship):**

.....

If you are/were a student, then please provide your student ID number: .....

### **Are you the Data Subject?**

**YES** if you are the Data Subject, please supply evidence of your identity i.e. driving license, birth certificate, UCB ID card.

**NO** are you acting on behalf of the Data Subject with their written authority? If so, that authority must be enclosed and please complete the following:

### **Details of the Data Subject (if different to the person requesting the information)**

Full Name: .....

Date of Birth:.....

Permanent Address:.....

.....

Tel No:.....Mobile:.....

Email: .....

**Please describe your relationship with the data subject that leads you to make this request for information on their behalf:**

.....

.....

**Please state below the information that you require:**

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

The information given on this application form to UCB needs to be accurate, as it is necessary for UCB to confirm your/the Data Subject's identity. It may be necessary to obtain more detailed information in order to locate the correct information. If UCB considers that the request is manifestly unfounded, excessive or repetitive UCB reserves the right to charge a reasonable fee for this access or to refuse to supply the data. Justification for this decision will be provided by UCB in this event.

**Signed:**..... **Date:**.....

Please return the completed form to Pro-Vice Chancellor Information Services, University College Birmingham, Summer Row, Birmingham B3 1JB. Documents which must accompany this application are:

- (i) Evidence of your identity
- (ii) Evidence of the Data Subject's identity (if different from above)
- (iii) Evidence of Data Subject's consent to disclose to a third party (if required, as indicated above)
- (iv) Where appropriate, a stamped addressed envelope for return of proof of identity/authority documents. UCB will accept no liability for loss of documents.

Please note that UCB reserves the right to obscure or suppress information that relates to other third parties under the terms of the General Data Protection Regulation 2016/679 and the Data Protection Act 2018.

Office Use Only:

Request Received On:

Date Completed:

Notes: