

Kymbrook Primary School	Kymbrook Primary School

Subject Access Request (SAR) Form

You can use this form to request access to your personal information held by our school. Our school's **Privacy Notices** details the personal information held, how we use this information and the reasons why we share this information.

You should describe the information you need as clearly as possible: it is not sufficient to ask for "everything about me". If your request is too broad or unclear, we may need to ask you to be more specific.

In addition, you must also enclose **proof of your identity** such as a photocopy of your passport, driving licence, or birth certificate.

This Subject Access Request form and proof of identity should be sent to the School GDPR Lead at the following

address:

Kymbrook Primary School Kimbolton Road

Keysoe Bedfordshire MK44 2HH

or emailed to GDPR@ktfederation.co.uk.

If you need assistance with completing this form or have any questions regarding the SAR process, please contact the School GDPR Lead on 01234 376266 or e-mail GDPR@ktfederation.co.uk

Section 1 – Details of person requesting information (requester)

Title :	Mr Mrs Miss Ms Title (please state):
Forename(s):	
Surname:	
Daytime Telephone	
No:	
Email Address:	
Current Address:	
Postcode	



Section 2 - Are you the Data Subject?						
☐ Yes - I am the Data Subject (the person the information is about) (go to Section 4): As the Data Subject, you will need to provide evidence of your identity so that we can check we are releasing the data to the correct person						
 No - I am acting on behalf of the Data Subject (go to Section 3) If you are acting on behalf of another adult, you must provide written authorisation from the Data Subject to obtain their personal data before this request can be processed. We will still require confirmation of the identity of the Data Subject. If you are acting on behalf of a child, you must provide evidence of parental responsibility 						
Section 3 – Details of Data Subject (if different from Section 1)						
Title (please tick one):	Mr Mrs Miss Ms Title (please state):					
Forename(s):						
Surname:						
Current Address:						
Postcode	Postcode					
My relationship to the data subject is: (e.g. parent; carer; legal representative)						
	oject is an adult, I have provided evidence of from the Data Subject to act on their behalf (e.g. letter of authority; Power of Attorney)					

If the Data Subject is a child,

I have provided evidence of parental responsibility for the Data

☐ Yes

Subject

□ No



Section 4 – Details of Information Required

Please use this space to give us any details about the information you are requesting. You should describe the information you need as clearly as possible: it is not sufficient to ask for "everything about me" or "everything about my child". If your request is too broad or unclear, we may need to ask you to be more specific.

Section 5 – How you wish the information to be sent to you Please indicate how you wish to receive the information:							
☐ Receive information post*		Collect the information in person		View a copy of the information only		Go through the information with the School Business Manager	
☐ Receive informatelectron	tion in inclu	will be sent an email to t uded in encrypted attach rypt the data. Details of t de	ments. You	will need to downloa	d the appi	opriate software to	

^{*} We will ensure that the information is addressed correctly. However, we cannot be held liable if the information is lost in the post or incorrectly delivered or opened by someone else in your household.

^{**} If you are making the request on behalf of another adult, we will in the first instance contact the Data Subject for authorisation regarding who we send the information to



Section 6 – Declaration

Verification of identity is required before your request can be processed.

I enclose as verification of identity a photocopy of my:						
☐ Driving Li	cence \square	Passport		Birth Certificate		Other
Data Subject Declara	tion					
I certify that, to the best of my knowledge, the information I have provided in this form is correct. I understand that the school is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.						
Print Name:						
Signed:						
Date:						
OR						
Authorised person D	eclaration					_
I confirm that I am legally authorised to act on behalf of the Data Subject. I understand that the school is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request. Print Name:						
Signed:						
Date:						
The information you have provided in this form will be kept confidential and kept for as long as necessary in accordance with our data retention schedule and will be disposed of in a safe and secure manner.						
Office Use				SAR Referen	ce No	
Actioned I	Зу			Date Form Rec	ceived	
ID Checked Da	te			Agreed Response	e date	
Information requeste confirmed Da				Date Respo	onded	
Not	Added to SAR	Log Y/N	ı		l	