

Thurleigh Primary School Thurleigh 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 our School GDPR Lead at the following address:

Thurleigh Primary School

High Street

Thurleigh

Bedford

MK44 2DB 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 our School GDPR Lead on 01234 771252 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** My relationship to the data subject is: (e.g. parent; carer; legal representative) If the Data Subject is an adult, I have provided evidence of ☐ Yes □ No authorisation 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 the information by post*	☐ Collect the information in person	☐ View a copy of the information only	Go through the information with the School Business Manager					
		Receive the information in electronic format	included in encrypted attachr	he email address entered in Section ments. You will need to download The encryption software will be pro	the appropriate software to					

Section 6 – Declaration

^{*} 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



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

I enclose as verification of identity a photocopy of my:									
	Driving Licenc	е 🗆	Passport		Birth Certificate		Other		
Data Subje	ect Declaration								
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 Nam	e:								
Signed: _									
Date:									
OR									
Authorise	d person Declar	ation							
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 Nam	e:								
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 Referenc	e No			
	Actioned By				Date Form Rece	eived			
ID C	hecked Date				Agreed Response	date			
	on requested				Date Respo	nded			
	Notes	Added to SAR	Log Y/N	1		,			