**Subject Data Access Request Form**

**The Information supplied in this form will be used only for the purposes of identifying the personal data you are requesting.**

You should complete this form if you want us to supply you with a copy of any personal data which we hold about you. You are entitled to receive this information under the GDPR.

We will endeavour to respond promptly and in any event within 30 days after the date of the latest of the following:

1. Our receipt of your Subject Data Access request **and** Identification; or
2. Our receipt of any further information which we request from you, as required by us to enable us to comply with your Subject Access Request, together with any relevant fee.

**Section 1**

Details of the Person requesting the information:

|  |  |
| --- | --- |
| **Full name** |  |
| **Address** |  |
| **Tel No** |  |
| **Email** |  |

**Section 2**

**Are you the Data Subject?**

**YES:** If you are the Data Subject, please supply evidence of your identity i.e. a driving licence, passport, national identity card, recent letter or bill from a utility company as evidence of address. (See note on Proof of identity below.)

**(Please go to Section 4)**

**NO:** Are you acting on behalf of the Data Subject with their written authority? If so, the authority must be enclosed, and you should also sign this form.

**Proof of Identity**

We must not knowingly give personal information to the wrong person and we must do our best to ensure that the personal information we have been asked for is given only to the person to whom this information refers, or to their authorised representative. Therefore, we require proof of your identity and address before we can disclose personal data. Please provide two forms of ID (a driving licence, passport, national identity card, a recent letter or bill from a utility company) as evidence of address.

We will **also** require evidence of identity of each agent who has signed this form.

**(Please go to Section 3)**

**NB: If we are not satisfied that you are who you claim to be, we reserve the right to refuse to grant your request**

**Section 3**

**Details of the Data Subject** (only complete if different from Section 1)

|  |  |
| --- | --- |
| **Full name** |  |
| **Address** |  |
| **Tel No** |  |
| **Email** |  |

**Section 4**

**What personal data do you require?**

Please describe the personal data that you require in as much detail as possible together with any other relevant information. If possible, please indicate any names of individuals or teams or dates you may have. This will help us to identify the information you require and respond to you quickly and helpfully.

|  |
| --- |
|  |

**Section 5**

If you wish to receive information about the following, please tick the boxes:

* why we are processing your personal data
* to whom your personal data is disclosed
* the source of your personal data which we hold

Please note that, if the information you request reveals details directly or indirectly about another person, we will have to seek the consent of that person before we can let you see the information. In certain circumstances, we may not be able to disclose the information to you, in which case you will be informed promptly and given full reasons for that decision. Information which relates to other people will often be redacted.

Please note that, while in most cases we will be happy to provide you with copies of the information you request, we nevertheless reserve the right, in accordance with section 8(2) of the Act, to refuse if to do so would take “disproportionate effort”. However, we will make every effort to provide you with a satisfactory form of access or summary of information if suitable.

**Declaration**

**(Please note that any attempt to mislead may result in prosecution.)**

This form must be signed both by you (the Data Subject) and your agent, if applicable.

* I confirm that I have read and understood the terms of this subject access form and certify that the information given in this application to the Bishops’ Conference of Scotland is correct and I am the person to whom it relates. I understand that it is necessary for the BCOS to confirm my/the data subject’s identity and it may be necessary to obtain more detailed information in order to locate the correct personal data.

Signature ……………………………………………………… Date……………………

Print Name…………………………………………………….

**Authorised Agent**

* I confirm that I am authorised to act on behalf of the Data Subject and that their personal information will be disclosed to them through me.

 **Please note that information can only be disclosed to those agents who have signed the form.**

**Signature: ……………………………………………………… Date: ……………………**

**Print Name: …………………………………………………………………………………..**

**Address: ………………………………………………………………………………………….**

**……………………………………………………………………………………………………………..**

**Data Protection:** This form will be kept by the Scottish Catholic Archives for data security purposes. The information will be processed in accordance with the GDPR, will be treated as confidential, and the data will only be used in the event of a breach of the agreement above.