**Dumfries and Galloway Council**

**Subject Access Request Form**

Under Data Protection legislation, you have the right to ask to see information held by the Council that is about you. Asking for your information is called the right of access and is commonly known as making a Subject Access Request or SAR.

Once the Council receives a Subject Access Request, all efforts will be made to fully comply within one month of receipt of your request. If we are unable to comply with your request within one month, we will inform you and explain why the extension is necessary. We can extend the time to respond by a further two months.

Any information that you put on this form will only be used for this request and will not be shared without your permission, unless the Council is legally obliged to do so.

**Proof of ID**

For your own protection we must make sure that the request is genuinely from you to protect your personal data. We do this in various ways:

* **If you are currently in communication with a Local Authority Officer**, such as a Social Worker, or a teacher, then they can confirm your identity. Either ask them to confirm you are the named person making the request by emailing [dataprotection@dumgal.gov.uk](mailto:dataprotection@dumgal.gov.uk) from their work email account or advise us of their name when making your request. **Please note the person you ask should not be related to you, living at the same address or in a relationship with you.**
* **If you do not have current contact with a Local Authority Officer,** please provide proof of identification (ID) when submitting your request. We will need two forms of identification to be sent along with your request. These should include something that identifies you, for example a passport, driving licence or birth certificate and something that confirms your address such as a utility bill. This list is not exhaustive and other forms of identification may be acceptable.
  + If making your application by post or email, please send photocopies rather than originals. Copies of your documentation must be certified. Certified means a professional person such as a doctor, dentist, police officer, teacher, social worker, bank official has signed and dated the documents to prove you are who you say you are. **Please note the person you ask should not be related to you, living at the same address or in a relationship with you.**
  + Or you can take proof of ID, along with your SAR, to a Council building, so that a member of Council staff can confirm your ID. If you are a parent or carer wishing to make a SAR, you can get your ID authorised at your child’s school.

If you do not have any of these forms of ID, please contact us. If we are unable to verify your identity with the information provided, we may need to ask for further information. The timescale for responding begins once you have completed the verification.

**Making a request on behalf of someone**

You may prefer a third party (e.g. a relative, friend or solicitor) to make a SAR on your behalf. To allow another person to access your information on your behalf we need to be satisfied that the third party is entitled to act on your behalf.

If you are asking for someone else's personal information, we will need a signed letter, or email from them confirming they want you to access this information, or provide other evidence that you are entitled to the information (e.g. proof of parental responsibility for a young child (under 12) or power of attorney).

You can make a SAR on behalf of a child only if they are your child and are too young to make the request themselves (under 12 years of age); you have their written permission to do so; or you have a power of attorney for the person concerned.

If you are making the request on behalf of another person, you and the person who the information is about will both need to provide proof of ID. Please see above section on Proof of ID. We won't be able to process your request until we have received proof of who you are.

Under the Data Protection legislation you have a right to access data relevant to you. If you wish to access data about someone else then you shall require their written consent, which you must make available to us. You may be committing an offence to seek data about other individuals without their consent.

**Records of being in care**

If you are asking for information about being in care, we understand that this can be difficult. If this is the case and you would like some support, please let us know and we can provide you with details of someone who can help.

**Completing this form**

Please complete the below form and return to:

Email: [dataprotection@dumgal.gov.uk](mailto:dataprotection@dumgal.gov.uk)

Or by post:

Data Protection Officer

Dumfries and Galloway Council Headquarters

English Street

Dumfries

DG1 2DD

If you would like help or advice when completing this form or have any questions, please contact the Information Governance Team at: [dataprotection@dumgal.gov.uk](mailto:dataprotection@dumgal.gov.uk) or by phone: 01387 260467

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| **Part 1: Personal details**  **Whose personal information is being requested?** | | |
| First Name: | | |
| Surname: | | |
| Previous or other name(s) known by: | | |
| Date of Birth: | | |
| Telephone number: | | |
| Email address: | | |
| Present Address: | | |
| Length of time at this address: | | |
| Please provide details of previous addresses that may be of assistance to this request: | | |
| **Part 2: Receiving the information** | | |
| Please let us know how you would like to receive the information requested (electronically, by post or collect in person).  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Part 3: The data you wish to access** | | |
| Please describe the information you need. Please give as much information as possible to help with your request.  Which Department/Service(s) might hold the data you are searching for (if known):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please provide details of any reference numbers that will assist us to locate the information you require (if known). Reference number(s):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please let us know any date ranges for the period of your request. These are important in helping us find the information you are looking for. For example, 31st March 2019 to 1st March 2020.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Part 4: Declaration**  **Please fill out part a) and/or part b) below as appropriate (dependent on who is requesting the information)** | | |
| **a)** This section is to be completed if you are requesting your own personal information: | | |
| Declaration: I confirm that I would like to receive the above information that is held about me by Dumfries and Galloway Council. I understand that it is an offence to impersonate another person.  I confirm that I am the Data Subject and am not acting on behalf of someone else. | | |
| Signed: | Date: | |
| **b)** This section is only to be completed if you are requesting someone else’s personal information: | | |
| Declaration: I confirm that I am acting on behalf of the data subject and have submitted proof of my identity and have authority to receive this data: | | |
| First Name: | | |
| Surname: | | |
| Address: | | |
| Telephone number: | | |
| Email address: | | |
| What is your relationship to the person you are requesting information on behalf of? (e.g. Parent, Power of Attorney): | | |
| Signature: | | Date: |

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| --- | --- |
| For Office Use Only: | |
| Date SAR was received: |  |
| What ID documents were provided: |  |
| Insert passport or driving licence number (if applicable): |  |
| Date of SAR identification verification check: |  |
| Name of employee who verified identification: |  |