

General Data Protection Regulation

Subject Access Request Form

Completing your request

Complete the form below and save it locally before sending it as an attachment to the following email address: dpo@kingston.ac.uk

You can also download and print this form and **post it to:**Data Protection Officer
Vice Chancellor's Office
Crescent House, Penrhyn Road
Kingston upon Thames, Surrey
KT1 2EE

The following information is required to help us provide a timely and accurate response to your request.

Section 1: About you	
Title:	
First Name(s):	
Surname:	
Current Address:	
Contact Phone Number:	
Email Address:	
Date of Birth:	
Other name by which you	
have been known, if	
applicable:	

Question: Are you the data subject of this request? If YES, please proceed to Section 3.

If NO, please complete Section 2.

Section 2: About the data sul	bject
Subject's Title:	
Subject's First Name(s):	
Subject's Surname:	
Subject's Current Address:	
Subject's Contact Phone	
Number:	
Subject's Email Address:	
Subject's Date of Birth:	
Other name by which the	
Subject may have been known, if	
applicable:	

Have you received permission from the data subject to request this information and how was permission provided?
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orovide the evidence of
permission

Section 3: About the subject's association	with Kingsto	n University		
What is the subject's relationship to Kingston	Staff		- KU ID Number	
University?	Student		NO ID Number	
Please provide approx. dates of study or employ				
Which Department or Faculty did the subject stu				
Which course/programme did the subject study				

Section 4: About the access request

Please describe the information that you are interested in obtaining, providing as much detail as possible. Details should include but are not limited to the following:

- a) Keywords to search by,
- b) Anything specific that you would like to know,
- c) Where the information is held (if known),

Ple	ase sta	ite	how	you wo	oulc	l pre	fer t	he i	int	format	ion	reques	ted	to	be	rece	ived	by	you.	Ticl	k as	approp	riate	,
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Email /	Post	In Person	
Electronically	(Recorded Delivery)	(Bv appointment)	

Section 5: Declaration

Note: in order to progress and fulfil your subject access request, proof of your identity and/or a security verification check will be required. You will therefore be contacted by a member of the Data Protection Team for Kingston University to provide this verification.

Please read the following declaration statement and carefully sign and date at the end:
I hereby certify that the information I have provided in this GDPR Subject Access Request form is accurate. I understand that it is necessary for a member of the Data Protection Team for Kingston University to contact me to confirm my identity and where applicable, verify my right to request a subject's information on their behalf.
I also acknowledge that it may be necessary for a member of the Data Protection Team for Kingston University to contact me to request more details pertaining to my subject access request in order to assist the locating of the correct information.
I am aware that in order to service my request you may need to ask a variety of directorates/members of staff to search/disclose information held in relation to my request and they may need to read through it to redact any information that relates to another person's personal data.
I have read and understood the above declaration statement. Please tick:
Signature:
Date: