**Data Subject Request Form**

Data protection law[[1]](#footnote-1) grants you certain rights in relation to your personal data held by Trinity College London (‘**Trinity**’). This includes the right to obtain confirmation that we process your personal data, receive certain information about the processing of your personal data, and obtain a copy of the personal data we process, the right to request correction or erasure of your personal data, and the right to restrict or object to certain types of data processing. For more information on your rights under the GDPR, see **Trinity’s Privacy Statement**, which is available at <https://www.trinitycollege.com/page/data-protection>

Should you wish to raise a request with Trinity to exercise your data protection rights, we recommend that you submit your request to us in writing using this form. Alternatively, you may make a verbal request and provide us with the information to complete the form on your behalf.

In line with data protection law, we would usually expect to respond to your request within **one month** of receipt of a fully completed form and proof of identity, though complex requests may take longer.

1. **DATA SUBJECT DETAILS**

Please provide your contact information in the space provided below. If you are making this request on behalf of someone, you should provide your name and contact information in Section 2.

Please note, we will only use the information you provide on this form to identify you and the personal data your request relates to, to process and respond to your request, and in relation to any claims or other legal proceedings or correspondence with the relevant regulatory or supervisory authority in connection with your request.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title:** | Mr [ ]  | Mrs [ ]  | Miss [ ]  | Ms [ ]  | Other: [ ]  |
| **Surname:** |  |
| **Forename(s):** |  |
| **Date of birth:** |  |
| **Telephone number:** |  |
| **Home** |  |
| **Work** |  |
| **Mobile** |  |
| **Email address:** |  |
| **Details of identification provided to confirm name of data subject:** |  |
| **Nature of your connection with Trinity:** |  |

**Proof of Identity**

Unless we already hold it, we require proof of your identity before we can respond to your request. To help us establish your identity, you must provide identification that clearly shows your name and date of birth. We accept a photocopy or a scanned image of one of the following:

* Valid passport
* Photo identification such as a driver’s licence or national identification number card

If you have changed your name, please provide the relevant documents evidencing the change, which must show the link between your old and new name. These documents could include marriage certificates, civil partnership certificates, gender recognition certificates, enrolled deed poll, change of name deed, unenrolled deed poll, adoption order or certificate, act of Parliament, statutory declarations, affidavits, birth certificate (when re-registering) and post-date form 2 (PD2).

Please note, we may request additional information from you to help confirm your identity and your rights in relation to the personal data we hold about you. We reserve the right to refuse to act on your request if we are unable to identify you.

If you do not have any of these forms of identification available, please contact Trinity’s Data Protection Officer on dpo@trinitycollege.com for advice on other acceptable forms of identification.

1. **DETAILS OF PERSON REQUESTING INFORMATION (IF NOT THE DATA SUBJECT)**

|  |  |
| --- | --- |
| Are you acting on behalf of the data subject with their written or other legal authority? | Yes [ ] No [ ]  |
| If ‘Yes’ please state your relationship with the data subject (e.g. parent, legal guardian or solicitor) |  |

|  |
| --- |
| **Please enclose proof that you are legally authorised to obtain this information.** |
| **Title:** | Mr [ ]  | Mrs [ ]  | Miss [ ]  | Ms [ ]  | Other: [ ]  |
| **Surname:** |  |
| **First name(s):** |  |
| **Current address:** |  |
| **Date of birth:** |  |
| **Telephone number:** |  |
| **Home** |  |
| **Work** |  |
| **Mobile** |  |
| **Email address:** |  |

As proof of your legal authority to act on the data subject’s behalf, we will accept a copy of **one** of the following:

* A written consent signed by the data subject
* A certified copy of a Power of Attorney
* Evidence of parental responsibility or legal guardianship
1. **DATA SUBJECT REQUEST**

Please provide as much information as possible regarding the scope of your request.

|  |  |  |
| --- | --- | --- |
| **Data Subject Request** | **Date from:** | **Date to:** |

1. **FEE**

We reserve the right to charge a reasonable fee when a request is manifestly unfounded or excessive, particularly if it is repetitive. We may also charge a reasonable fee to comply with requests for further copies of the same information. The fee is based on the administrative cost of providing the information.

1. **DECLARATION**

I, ………………………………………………………, the undersigned and the person identified in (1) above, hereby request that Trinity provide me with the data about me identified above.

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

DSAR form completed by (name):

**OR**

I, ………………………………………………………, the undersigned and the person identified in (2) above, hereby request that Trinity provide me with the data about the data subject identified in (1) above.

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

DSAR form completed by (name):

**This form must be emailed to Trinity College’s Data Protection Officer at** **dpo@trinitycollege.com**

1. In particular, Article 15 of the EU General Data Protection Regulation (Regulation (EU) 2016/679) as it forms part of the law of England, Wales, Scotland and Northern Ireland by virtue of Section 3 of the European Union (Withdrawal) Act 2018 as amended by the Data Protection, Privacy and Electronic Communications (Amendments) etc (EU Exit) Regulations 2019 (as amended), in each case, as amended, re-enacted, consolidated, revised or replaced from time to time. [↑](#footnote-ref-1)