

Individual Rights Request Form

This form should be used to submit a data subject request under the provisions of the General Data Protection Regulation (GDPR) and Data Protection Act 2018.

You may be required to supply proof of identify, such as a photocopy or scan of your passport, driving licence or proof of address for the last 3 months. We will contact you if we require this.

If you are making a request on behalf of someone else, such as a child, an adult relative or a friend, you must send us proof of identify of yourself and that person, as well as written evidence of permission/authorisation to indicate that you can act on behalf of that individual e.g. a copy of Lasting Power of Attorney. Any individual aged 13 or over must also sign the form to give us their permission to send you the information.

1. Requester Details

We will send the information to you using these details. Please note that it is an offence to pretend to be someone else and ask for information about them. You must have written permission to act on behalf of another.

|  |  |
| --- | --- |
| **Your full name:** |  |
| If we hold information about you under a previous name, what was that name? |  |
| **Address and postcode:** |  |
| If we hold information about you under a previous address, what was that address and postcode? |  |
| **Email address (if you want a response by email):** |  |
| **Phone number:** |  |
| Responses will be sent by email if the request was received electronically (by email, online, via social media) or on paper if the request was received by post, unless you specify otherwise. | |

1. If you are asking for information about someone else

|  |  |
| --- | --- |
| **Their full name and address:** |  |

1. If you are asking for information about a child

|  |  |
| --- | --- |
| **Child’s date of birth** |  |
| **Do you have parental responsibility for the child? *State“Yes” or “No”*** |  |

1. Type of Request

Please select the type of request(s) you are making (you may exercise more than one right):

|  |  |
| --- | --- |
|  | *Access request* |
|  | *Rectification of personal data* |
|  | *Erasure of personal data* |
|  | *Restriction of processing of personal data* |
|  | *Personal data portability request* |
|  | *Objection to processing of personal data* |
|  | *Request regarding automated decision making and profiling* |

# Personal data

|  |
| --- |
| Use this space to tell us what personal data you want us to locate. So that we can find the information please tell us about the context of your interaction with us, which NCI/s may hold the information, and any dates or references or other relevant information that will help us locate the data. |
| *Please continue on a separate sheet if you need to, and attach it.* |

# Request details

|  |
| --- |
| Use this space to tell us what you would like us to do, (i.e. how you want to exercise your right(s)). |
|  |

1. **Signature and declaration**
2. Under the GDPR and the Data Protection Act 2018 I wish to exercise my rights, as detailed above.
3. I confirm that *I am the subject of this information* / *acting on another’s behalf and I have attached written permission to do so*. (delete whichever is not appropriate).
4. I understand that you have one calendar month to respond to my request as set out in the GDPR. This time period will not start to run until sufficient evidence of identity (and/or proof to act) has been provided. I understand that this time frame may be extended by a further 2 months in certain circumstances, such as where the matter is unduly complex or involves multiple requests. I understand that you will contact me directly as soon as possible informing me of any delay and in any event within 1 month of receipt of my request(s).
5. I confirm that I am happy for my personal details to be passed to the Data Protection Team to process my request(s).

|  |  |
| --- | --- |
| **Signature:** |  |
| If sending this by email, an electronic signature or typed signature is acceptable. If you wish, you can print this form, sign it and send us a scanned version. | |
| **Date:** |  |

1. **Other person’s signature**

If you have requested information on behalf of any individual aged 13 or over, that person must sign this declaration:

I (whose name appears in section 2 above) give my permission for this request regarding my personal information, as described above, to be made on my behalf by the person whose name appears in section 1 above.

|  |  |  |
| --- | --- | --- |
| **Signature:** |  | |
| If sending this by email, an electronic signature or typed signature is acceptable. If you wish, you can print this form, sign it and send us a scanned version. | | |
| **Date:** | |  |

Once completed, this form should be submitted via email to [gdpr@churchofengland.org](mailto:gdpr@churchofengland.org)

or posted to:

Data Protection Team

Church of England Record Centre

15 Galleywall Road, London, SE16 3PB

On receipt of this form, we will acknowledge your request by email or post, and let you know if we need any further information from you to fulfil your request.