1. **DATA SUBJECT DETAILS:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title** | Mr [ ]  | Mrs [ ]  | Miss [ ]  | Ms [ ]  | Other: [ ]  |
| **Surname** |  |
| **First name(s)** |  |
| **Current address** |  |
| **Telephone number:**  |  |
| **Home** |  |
| **Work** |  |
| **Mobile** |  |
| **Email address** |  |
| **Date of birth** |  |
| **Details of identification provided to confirm name of data subject:** | We will need two copies of forms of identification, which can be: Passport, Driving licence, Birth certificate, Utility bill (from last 3 months), Current vehicle registration document, Bank statement (from last 3 months, Rent book (from last 3 months).Note: Cognus will not retain these details after you identity has been verified. |
| **Details of data requested:** |  |

* 1. ***DETAILS OF PERSON REQUESTING THE 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** |  |
| **Telephone number:**  |  |
| **Home** |  |
| **Work** |  |
| **Mobile** |  |
| **Email address** |  |
|  |  |
| **Parental/carer request:** | Please include reasonable evidence that you are the parent/carer of the child or young person for whom you are submitting this subject access request.  |

1. **DECLARATION**

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

Signature: Date:

I, ………………………………………………………, the undersigned and the person identified in (1.1) above, hereby request that Cognus provide me with the data about the data subject identified in (1) above.

Signature: Date:

This form must immediately be forwarded to Cognus’s Head of Resources.