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** |  | | | | |
| **Internal Use Only:**  **Details of identification provided to confirm name of data subject:**  **Note: Copies of documentation should not be retained once you are satisfied as to the data subject’s identity** |  | | | | |
| **What are you requesting to be done with your personal data?**  **(If a member of staff is completing this section on behalf of the data subject - what is the data subject requesting to be done with their personal data?)**  **When filling this out please be as specific and detailed as possible to help us comply with the request** |  | | | | |

* 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. 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** |  | | | | |

1. **DECLARATION**

I, ………………………………………………………, the undersigned and the person identified in (1) above, hereby request that Cognus comply with my request as detailed above.

Signature: Date:

Internal Use Only: form completed by (employee name):

I, ………………………………………………………, the undersigned and the person identified in (1.1) above, hereby request that Cognus comply with my request as detailed above in respect of the data subject identified in (1) above.

Signature: Date:

Internal Use Only: form completed by (employee name):