



Subject access request form

You have the right to know about the data we hold on you under the Data Protection Act 1998 and the general protection regulation (GDPR) 2018, this is known as 'Subject Access'. Use this form to make a written request and we shall meet our obligations within 1 month except where the request is complex or numerous in which case it may take up to 3 months.

Requesting information

Describe the information you are requesting as clearly as possible, it is not enough to ask for "all information held."

The Institute may need to seek clarification if a request is unclear or too broad.

The more detail you can provide, the simpler it will be for us to try and answer it.

Examples of the type of useful information may include:

- Whether it is likely to be held by a specific department
- Whether it is likely to be held with, or contained in, specific documentation.

Fees

The Institute will provide this information free of charge except where the request is excessive, unfounded or repetitive in which case a fee may be charged in accordance with the GDPR or ICST refuse to supply the information requested with an explanation as to why.

Proof of Identity and of Address

Proof of the Data Subject's identity and address must be provided in order for a request to be processed. These can be:

- Copy passport, driving licence or birth certificate, together with;
- Copy of a bill or statement dated within the last 3 months

You can upload both pieces of information here

Format of Information

You are entitled to say how you wish the information to be communicated to you. This may be in a hard format, electronically, or by inspection at the Institute on a date and at a time to be mutually agreed between you and the Institutes Data Protection Officer. It may not be possible to provide all information in the format requested.

1) Applicant details

Surname*		
Forename*		
Address*	Postcode:	
Email*		
Telephone Number		
Member Number (if applicable)		
Are you the Data subject?*	Yes (please go to section 3)	No (please go to section 2)
(please indicate)		

* Denotes fields that must be completed to action your request.



2) Data subject details (if different from above)

If the applicant is acting on behalf of the Data Subject, written authority from the Data Subject must be enclosed, along with their identity documents.

Surname*	
Forename*	
Address*	Postcode:
Email*	
Telephone Number	
Member Number (if applicable)	

* Denotes fields that must be completed to action your request.

3) Description of information requested

4) Format of information

Please specify the format in which you would like the information to be supplied, eg. paper, email.

4) Declaration

I am/have been authorised by, the data subject named in this form and request that the Institute of Clinical Science and Technology provide me with a copy of the personal data described above. I understand that it is necessary for the Institute to confirm a Data Subject's identity and this application will not be processed until it, and the relevant fee is provided.

Signed:

Date:

Required accompanying documents:

- Proof of your identity
- Proof of your address
- Proof of the Data Subject's identity and address, if different from above
- Signed written authority of the Data Subject if you are acting on their behalf

This is an online form. If you prefer to send in the request in a hard copy you can do so to:

The Director of Student Services
The Technopark
90 London Road
London, SE1 6LN