**Data Subject Rights Form**

**Please note:** if you wish to **obtain a copy** of your personal information, please use the **Data Subject Access Request form** rather than this one. Please contact the data protection officer on [dataprotectionofficer@nottinghamcollege.ac.uk](mailto:dataprotectionofficer@nottinghamcollege.ac.uk) for this form or for any enquiry related to your information rights.

You can use this form to request:

1. Correction (rectification) or completion of information that Nottingham College holds about you
2. Deletion (erasure) of any or all of the information the College holds about you
3. Restriction of the processing of the information the College holds about you
4. To object to any of the processing of your information that the College carries out
5. To make enquiries about transferring your information to another organisation or any decision that may have been made about you by a computer only

Your request will be assessed, and you will be informed of the action that the College has taken, and the reasons behind it.

Please use this form to set out as clearly as possible which information you would like the College to act on, and the action that you would like us to take.

Please return your completed form and proof of identity (detailed overleaf) to the data protection officer at: data[protectionofficer@nottinghamcollege.ac.uk](mailto:protectionofficer@nottinghamcollege.ac.uk). The College endeavours to respond to all requests within one month from the date that they are received.

1. **Your Details (please complete section 2 if you are acting on behalf of someone else):**

|  |  |
| --- | --- |
| Surname |  |
| Forename(s) |  |
| Current address |  |
| Date of birth |  |
| Tel No – Home |  |
| Tel No – Mobile |  |
| Email address |  |
| Details of identification provided to confirm name of data subject: | One form of identification is required from the following list. Further information may be required if there has been a change of name.   * Passport * National identity card * Driving licence * Birth certificate |
| **Action that you wish the College to take:**  Please state whether you wish the College to:   * Correct * Complete * Delete; or * Restrict processing of your information,   or whether your query relates to your personal information in another way. |  |

|  |  |
| --- | --- |
| **Details of information to which your request relates:**  You should describe the information to which your request relates as clearly as possible.  It would be helpful in this section to explain if you are a current or former student or member of staff, and where information about you might be held by the College. |  |

1. **Details of person and organisation acting on the data subject’s behalf (if this request is not being made by the Data Subject):**

|  |  |
| --- | --- |
| Surname |  |
| Forename(s) |  |
| Organisation |  |
| Current address |  |
| Date of birth |  |
| Tel No – Home |  |
| Tel No – Mobile |  |
| Email address |  |

**Please enclose proof that you are legally authorised to obtain this information:**

|  |  |
| --- | --- |
| 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, parent, legal guardian) |  |

**3. Declaration(s)**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned, and the person identified in (1) above, hereby request that Nottingham College provide me with the data about me identified above.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned, and the person identified in (2) above, hereby request that Nottingham College provide me with the data about the data subject identified in (1) above.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_