

Form: Data Subject Access Request (DSAR) Form

Section A: Data Subject details					
Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other: <input type="checkbox"/>
Surname					
First name(s)					
Current address (if you request the information by post this is the address we will post it to)					
Previous address (or addresses) if you have moved in the last five years					
Telephone number:					
Home number:					
Work number:					
Mobile number:					
Email address:					
Date of birth:					
Details of identification provided to confirm name of data subject:					

**Section B:
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 <input type="checkbox"/> No <input type="checkbox"/>				
If 'Yes' please state your relationship with the data subject (e.g. parent, legal guardian or solicitor)					
Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Other: <input type="checkbox"/>
Surname					
First name(s)					
Current address					
Telephone number:					
Home number:					
Work number:					
Mobile number:					
Email address:					
Details of proof that you are legally authorised to obtain this information:					

Section C: The Request

Details of data requested (Please be as specific as possible, providing timeframes, names/job titles of people who you believe are processing your personal data and as much information as possible to enable us to locate the personal data that you are requesting).

How would you ideally like the information to be supplied to you? This could be by post, by email or orally.

Please note that, dependent upon volume, we may have to overrule your ideal choice. For example, it would be impractical to convey a large volume of information orally.

Declaration (completed by the data subject)

I,, the undersigned and the person identified as the data subject in Section A of this form, hereby request that Transform Housing & Support provide me with the data about me identified above.

Signature:

Date:

Declaration (completed on behalf of the data subject)

I,, the undersigned and the person identified in Section B of this form, hereby request that Transform Housing & Support provide me with the data about the data subject identified above

Signature:

Date:

Once completed please either:

- **Email the signed and completed form** to Transform's Information Risk Officer at: GDPRinfo@transformhousing.org.uk
- **Post the signed and completed form to:**
Information Risk Officer, Transform Housing & Support
Bradmere House, Brook Way, Leatherhead, Surrey, KT22 7NA