## **PERSONAL DATA ACCESS REQUEST FORM**

### St. Conleth & Mary's NS

### Naas Rd, Newbridge, Co. Kildare

#### Phone: 045-431179 Email: scoilcm@hotmail.com

#### Request for a copy of Personal Data under the Data Protection Acts 1988 to 2018

<u>Important:</u> Proof of Identity must accompany this Access Request Form (e.g., official/State photographic identity document such as driver's licence, passport).

Full Name:	
Maiden Name (if name used during you	r school duration)
Address:	
Contact number *	Email addresses *

\* We may need to contact you to discuss your access request

#### Please tick the box which applies to you:

Parent/	Former Pupil	Current Staff	Former Staff
Guardian of current Pupil		Member	Member:

Name of Pupil:		Date of Birth of Pu	pil:
Insert Year of leaving:	Inse	Insert Years From/To:	

## **DATA ACCESS REQUEST:**

To help us to locate your personal data, please provide details below, which will assist us to meet your requirements e.g., description of the category of data you seek.

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Any other information relevant to your access request (e.g., if requesting images/recordings made by CCTV, please state the date, time and location of the images/recordings as otherwise it may be very difficult or impossible for the school/ETB to locate the data)

This **Access Request** must be accompanied with a copy of photographic identification e.g., passport or driver's licence. I declare that all the details I have given in this form are true and complete to the best of my knowledge.

Signature of Applicant ...... Date: .....

Please return this form to the relevant address:

To: The Chairperson of Board of Management, St. Conleth & Mary's NS, Naas Rd, Newbridge, Co. Kildare