



**DATA PROTECTION ACT, 1998
SUBJECT ACCESS REQUEST APPLICATION FORM**

Please complete this form and send it, along with the appropriate fee, to:-

The Data Protection Officer, Aberdeenshire Council,
St. Leonard's, Sandyhill Road, Banff, AB45 1BH

Please make your cheque payable to Aberdeenshire Council.

Forename(s)	
Surname	
Date of Birth	
Address	
Postcode	
Telephone Number	

Services:-

Aberdeenshire Council uses personal data for a number of purposes. Please indicate the purposes to which you seek access by placing a tick in the relevant boxes:-

<input type="checkbox"/>	Council Tax	<input type="checkbox"/>	Planning
<input type="checkbox"/>	Housing Benefits	<input type="checkbox"/>	Recreation
<input type="checkbox"/>	Education	<input type="checkbox"/>	Rent
<input type="checkbox"/>	Environmental Health and Consumer Protection	<input type="checkbox"/>	Social Work
<input type="checkbox"/>	Housing	<input type="checkbox"/>	Other (Please indicate below)
<input type="checkbox"/>	Personnel (Employment records)	<input type="checkbox"/>	

Further Information:-

Further information will assist in identifying and locating the data you are seeking. Please provide the following, if applicable and known:-

Reference / Account / Employee Number	
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Service / School involved	
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Any other relevant information (Nicknames, maiden names, etc..)	

Distribution of Information:-

If you tick this box then the information that you request will **not** be sent out. Instead, you must collect it at the address above. In order to do so, you must have proof of your identity. This must be one of the following:-

- a) A passport;
- b) A new style driving licence with photograph;
- c) A photograph certified by a member of Aberdeenshire Council staff;
- d) A photograph certified by a Justice of the Peace, lawyer, doctor, etc., as belonging to the person making the request.

Data Subject Declaration:-

In exercise of the right granted to me under the terms of the Data Protection Act, 1998, I request that you provide me with a copy of the personal data about me which you process for the purposes I have indicated above.

I confirm that I am the Data Subject and not someone acting on his / her behalf.

Signature:		Date:			
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Declaration of Agent for the Data Subject:-

This section is only to be completed if someone else is acting on behalf of the Data Subject.

I confirm that I am acting on behalf of the Data Subject and have submitted proof of my authority to do so.

Forename(s)					
Surname					
Address					
Postcode					
Telephone Number					
Relationship					
Signature:		Date:			

This form requests the minimum amount of information required to identify the Data Subject (Person about whom data may be held)
You may be asked to supply additional information.

This information will be used for the purpose of processing your Subject Access Request only.

If you require this form in a different language, or larger point size, please leave a request on 01261 813354.