Data Protection



Subject Access Request Form

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Q5. Please state the area of University records that you want this subject access request to cover. Please be as precise as possible.
I enclose the following:
Tick()
Administrative fee (if applicable) (cheque made payable to the 'University of Bolton')
Proof of your identity
Proof of Data Subject's identity (if different from above)

Written authority of Data Subject's consent to disclose to a third party (if required)

Stamped addressed envelope for return of proof of identity/authority documents, where required.

Declaration:	
I, certify that the information given on this application form is true and accurate. I understand that it is necessary for the University of Bolton to confirm my / Data Subject's identity and that it may be necessary to obtain more detailed information in doing so.	
Signed	Date

Please return the completed form to: Data Protection Officer sar@bolton.ac.uk