## RESTRICTED (when complete)



## Application for Access to Your Personal Data Held by the Aster Group as Data Controllers

#### **Your Subject Access Rights**

The information you supply in connection with this application will be used to administer this request and for this purpose we are registered with the Information Commissioner's Office.

Subject to certain exemptions, you have a right to be told whether the Aster Group holds any information about you (your "personal data"), and a right to be provided with a copy of that personal data within 1 month.

If you wish to exercise those rights, please complete this form **carefully, IN BLOCK CAPITALS** and follow the instructions regarding proof of identity and ways to return the form.

Under Data Protection law, Aster Group may, in certain circumstances, decide not to provide you with some personal data. For example, we will not provide personal data if we feel releasing it to you would be likely to prejudice legal proceedings, and we may not provide you with information that identifies other individuals. A full explanation of what documents have been withheld any why will be provided to you with your final pack.

#### Charge

There is no longer a charge for submitting a Subject Access Request

#### Returning Your Form

You can return your completed form and proof of identity by email or post;

Email: DataProtection@aster.co.uk

Post: Data Protection Officer

Risk & Compliance

Aster Group 2<sup>nd</sup> Floor

**Priory Medical Centre** 

Wells Somerset BA5 1XJ

If you require any guidance or support with this form, or would like to return it to us in person please call the Data Protection Officer on 01749 832118.

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#### **Section 1: Your Details**

Please provide the information in the below table to help us prove your identity. Please ensure that information has been completed correctly and **IN BLOCK CAPITALS**. All correspondence in relation to this application will be sent to the "current address" you provide unless you have advised otherwise

Surname	
First Name(s)	
Maiden/Former Names	
Title (Miss, Mrs, Mr etc)	
Date of Birth	
Current Address including postcode	
Any other addresses that Aster may hold in connection with you	
Telephone No. *	
Email Address *	

#### Section 2: Proof of Identity & Residence

We need to verify your identity so we are satisfied that you are who you say you are. This is a requirement of Data Protection law and is intended for your protection, so as to prevent unauthorized disclosure of your personal information to a third party.

To help us establish your identity, your application must be accompanied by copies of two different official documents which between them provide sufficient information to prove your name, date of birth, current address and signature. Examples of these are below. We do accept photocopies but we reserve the right to request original documents in some cases.

If you wish to provide this information in person, please call 01749 832118 to arrange a convenient time and location to provide this evidence. Alternatively, you may post or email legible copies.

Proof of Identity	Proof of residence
<ul> <li>Passport</li> <li>Driver's License</li> <li>Government-issue Photo Identification</li> <li>National Insurance Card</li> <li>NHS Card</li> <li>Identity Card e.g. Union Membership</li> <li>Tenancy Agreement</li> <li>Credit or Bank Card</li> <li>Birth Certificate</li> </ul>	<ul> <li>Rent Card/Book</li> <li>Benefit Book</li> <li>Council Tax Bill</li> <li>Utility Bill within the last 3 months</li> <li>Credit or bank card statement within the last 3 months</li> <li>Letter from a Government Department</li> </ul>

<sup>\*</sup>Completion of these fields is not mandatory, but will assist us if we need to contact you to discuss your application

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## Section 3: Personal Data Sought

Please provide us with enough details to locate the information you require, for example; "lile between 2012-2014," or "copies of correspondence about me." The more specific with what you are looking for, the quicker we are likely to be able to respond with the recinformation.				

### Section 4: How to Receive Your Pack

Please advise how you wish to receive your final pack by ticking one of the following options:

Options:	Tick
Receive a link to Liquidfiles via email	
Uploaded to a brand new, sealed USB stick provided by you	
Sent via Royal Mail special delivery service	

## Section 5: Declaration (to be signed by the applicant)

<ul> <li>The information</li> </ul>	I have read and understood the contents of this form  The information that I have supplied in this application is correct, and I am the persor to whom it relates		
Signature			

Date

**WARNING:** A person who impersonates another or attempts to impersonate another may be guilty of an offence.

### **Section 6: Checklist**

Before returning your form please check that you have:	Tick
advised how you wish to receive your final pack	
<ul> <li>enclosed two of the documents listed above, one of which is proof of identity and the other proof of residence</li> </ul>	
signed and dated the form	