



SAR Request Form

Data Subject (person about whom information is requested)

Title	
Name	
Date of Birth	
Year group (if a child or young	
person)	
erson Making the Request	
Name	
Date of Birth	
Address	
Email Address	
Contact Phone	
Identification Evidence	
Provided (if required):	
 Passport 	
Driving License	
Or	
Two forms of the following:	
 Utility bill within last three 	
months	
• Bank statement within last	
three months	
 Council Tax bill 	
Rent book	

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Parent or person with parental	
responsibility	





Are you acting on their written	
authority? (Please provide a	
copy of the consent.)	
If not the parent or person with	
parental responsibility, what is	
your role?	
Details of Data Requested	
Details of Data Requested	
Declaration	
Declaration	
1	, hereby request that Holy Rosary Catholic Voluntary
Academy provide the data requester	
	u
about me.	
Signature:	Dated:





l,	., hereby request that Holy Rosary Catholic Voluntary
Academy provide the data requeste	d
about	
	(insert child's name) on the basis of the authority that I
have provided.	
Signature:	Dated: