

GREEN LANE PRIMARY

SUBJECT ACCESS REQUEST

Please refer to our Data Protection Policy for details of how subject access requests will be processed.

DATE:	
NAME OF PUPIL :	YEAR GROUP:
Information being requested by:	
Name:	
Relationship to child:	
Information being requested: <i>Please detail what information held by the school you would like to see.</i>	
Reason for request:	
I would like to arrange a time to view the information requested in school.	
I would like a copy of the information requested to view outside of the school premise.	

I understand that information I receive will have the names of other children removed should this apply.

SIGN: _____ Date: _____

Please pass this form to a member of the office team.

Received by	Name:	Role:	Sign:
Approved by	Name:	Role:	Sign:
Actioned by	Name:	Role:	Date:

Information Provided:	
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