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| Data Subject (person who the information is about)  |
| Full Name: |  | Title: |  |
| Date of Birth: |  |
| Year Group (if child or young person): |  |

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| Requester information:  |
| Full name: |  | Title: |  |
| Date of Birth: |  | Date of request : |  |
| Address: |  |
| Contact telephone number: |  | Email address: |  |
| Identification Evidence Provided (if required) Passport orDriver’s license+ 2 of the below:Utility bill dated within last 3 monthsBank statement within last 3 months Council tax bill dated within last 3 months |  |
| Parent or person with parental responsibility: |  |
| Are you acting on their written authority (please provide consent) |  |
| If none of the above what is your role?  |  |

| Details of the request  |
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| Declaration:  |
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| I hereby request that Penistone Grammar School provide me the data requested about me, or on the basis of authority that I have provided.  |
| Signed: |  | Dated: |  |