

# Data Protection Request



## North Yorkshire County Council

### Application Form

Please complete this form in as much detail as possible so that we can ensure we are able to comply with your request as quickly and effectively as possible.

#### Your Privacy

The information you provide on this application form will be used to facilitate your Data Protection request. The information will only be disclosed to individuals in the Council who require it to complete your request.

Please be aware that your information may be passed to the Council's Counter Fraud Service and/or the Police if we suspect any fraudulent activity.

For more information about how we use your personal data please see the Council's Privacy Notice on its [website](#).

### Part One – About You

*(So that we can easily identify you)*

Your First Name								
Your Second Name								
Any Previous Names:								
Your Address:								
Date of Birth:	D	D	M	M	Y	Y	Y	Y
Your Email Address (Optional):								
Your Phone Number (Optional):								

### Part Two – Other Persons

*(So that we can easily identify them)*

Are you making this request on behalf of, or in conjunction with, another person? <i>(please circle)</i>	YES (Please fill in the below)	NO (Please continue to Part Three)						
Data Subject(s) First Name:								
Data Subject(s) Second Name:								
Any Previous Names:								
Their Address: <i>(If different from above)</i>								
Their Date of Birth:	D	D	M	M	Y	Y	Y	Y

Your relationship to the data subject <i>(Please Circle)</i>	Parent	Friend	Solicitor / Agent
	Other (Please State):		
Does the data subject know that you are making this request?			
Your Phone Number (Optional)			

### Part Three: Your Relationship with the Council

*(So that we can easily find your information)*

Which Council services are you involved with or have had involvement with? <i>(Please circle)</i>	Business and Environmental Services	Children and Young People's Services	Health and Adults Services
	Legal Services	Library Services	Human Resources
	Other <i>(Please state):</i>		
Name of current/previous worker or team <i>(Please state)</i>			
Are you a current NYCC employee <i>(Please circle)</i>	YES	NO	

### Part Four: Your Application

*(So that we can easily understand your request)*

What Data protection Right would you like to exercise? <i>(Please circle)</i>	Right of Access (Subject Access Request)	Right of Erasure (Deleting Information)
	Right of Rectification (Correcting Information)	Right of Restriction (Restrict to one processing purpose)
	Other (Please State):	
What is your request? <i>(Please be as detailed as possible so that we can understand your request)</i>	<i>&lt;If you require more space please use page 4&gt;</i>	

**Part Five: Preferences and Equality***(So that we can easily meet your needs)*

How would you prefer the information to be supplied to you?	Paper Copies	Electronic Copies
Do you require your information in large print?	YES	NO
Any other requirements? <i>(please state)</i>		

**Part Six: Your Signature***(So that we can ensure that you are happy for us proceed with this request)*

Signature:								
Date of Request:	D	D	M	M	Y	Y	Y	Y

**Please return this application form and copies of your ID to:****PRIVATE AND CONFIDENTIAL**

Data Protection Officer  
 North Yorkshire County Council  
 County Hall  
 Racecourse Lane  
 Northallerton  
 North Yorkshire  
 DL7 8AL  
[infogov@northyorks.gov.uk](mailto:infogov@northyorks.gov.uk)

**Office Use Only**

Request Number:	
Date Received:	
ID Type:	
ID Validated By :	

**Extra Space (Optional)**