# Data Subject Access/Change Request Form

The following information is needed to help us give a quick and accurate response to your enquiry. Please complete the information below and return the form by post or email to the MCR President (contact details provided below).

# Part A. Your request

|  |  |
| --- | --- |
| Title: |  |
| Surname: |  |
| Forename(s): |  |
| Address: |  |
| Telephone number: |  |
| Email address: |  |
| Other name by which you have been known, if applicable: |  |
| Relationship to the College: |  |

**Please provide a description of your request, and any further information which will enable us to locate your personal data (continue overleaf if necessary).**

**Part B. Proof of identity**

Data Protection legislation requires the College to satisfy itself as to the identity of the person making the request. Please send a photocopy of one form of identification containing a photograph (e.g. University Card, Passport, Photocard Driving Licence) to the Data Protection Officer. If the supply of this documentation is problematic, please contact us to discuss alternative proof of identity arrangements. If the College is unable to satisfy itself as to your identity from the documentation you send us, we will contact you as soon as possible.

# Part C. Declaration

I am the Data Subject named in Part A of this document, and hereby request, under the provisions of Data Protection legislation, that Robinson College MCR provides me with copies of my personal data and/or makes the changes requested as described above.

I have provided my proof of identity.

Signature: ………………………………………….………… Date: ………….............................

Please return this request to: MCR President

Robinson College, Grange Road, Cambridge CB3 9AN Tel: 01223 339100

mcr-president@robinson.cam.ac.uk