**Dumfries and Galloway Council**

**Mandate - Permission to release your personal data**

Please use this form to give your permission for Dumfries and Galloway Council to give personal information it holds about you to another person. This form can be used to:

* Give permission for someone to make the request on your behalf
* Give permission for the information that you have requested to be released to another person

This form will only be used to help us process your current request.

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| **Section A – The person whose information is being requested** |

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| First Name: |
| Surname: |
| Previous or other name(s) known by: |
| Date of Birth: |
| Telephone number: |
| Email address: |
| Present Address: |
| Please provide details of previous addresses that may be of assistance to this request: |

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| **Section B - The person you are authorising to receive your personal information** |

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| First Name: |
| Surname: |
| Previous or other name(s) known by: |
| Date of Birth: |
| Telephone number: |
| Email address: |
| Present Address: |
| Please provide details of previous addresses that may be of assistance to this request: |
| Relationship to the person mentioned in Section A: (e.g. relative, friend, advocate, legal adviser) |

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| **Section C - Information to be released** |

**Please tell us about the information you wish us to share. It would be helpful to provide as much detail as possible:**

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Please let us know any date ranges for the period of your request. These are important in helping us find the information you are looking for. For example, 31st March 2019 to 1st March 2020.

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| **Receiving the information** |

We will release the relevant information to the person you have identified and authorised above. Please tell us how they wish to receive the information.

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| Via secure Email: |  |
| Collection of paper copy from approved location: |  |

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| **Identification** |

**We require identification from both people completing this form.**

You must provide you own ID and the ID of the person you have identified, authorised as above.

**Proof of ID** – we do this in various ways:

* **If you are currently in communication with a Local Authority Officer**, **such as a Social Worker, or a teacher**, then they can confirm your identity. Please ask them to confirm you are the named person making the request by emailing [dataprotection@dumgal.gov.uk](mailto:dataprotection@dumgal.gov.uk) from their work email account. **Please note the person you ask should not be related to you, living at the same address or in a relationship with you.**
* **If you do not have current contact with a Local Authority Officer,** please provide proof of identification (ID) when submitting your request. We will need **two** forms of identification to be sent along with your request one of which should include your address.

Something that identifies you, for example:

* **Passport**
* **driving licence**
* **Birth certificate** **or adoption certificate**
* **Solicitor/Lawyer Mandate**

Something that confirms your address such as:

* **utility bill**
* **bank statement**
* **council tax bill**

This list is not exhaustive and other forms of identification may be acceptable.

* + If making your application by email or post, please send black and white photocopies rather than originals.
  + Or you can take proof of ID, along with your SAR, to a Council building, so that a member of Council staff can confirm your ID. If you are a parent or carer wishing to make a SAR, you can get your ID authorised at your child’s school.

If you do not have any of these forms of ID, please contact us. **If we are unable to verify your identity with the information provided, we may need to ask for further information. The timescale for responding begins once you have completed the verification.**

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| **Declaration** |

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| I, the person noted in **Section A**, authorise Dumfries and Galloway Council to release my personal information to the person noted in **Section B** to process my subject access request. | |
| Signed: | Date: |

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| **Completing this form** |

Please complete the form and return along with your proof of identify to:

Email: [dataprotection@dumgal.gov.uk](mailto:dataprotection@dumgal.gov.uk)

Or in person or by post to:

Data Protection Officer

Dumfries and Galloway Council Headquarters

English Street

Dumfries

DG1 2DD

If you would like help or advice when completing this form or have any questions, please contact the Information Governance Team at: [dataprotection@dumgal.gov.uk](mailto:dataprotection@dumgal.gov.uk) or by phone: 01387 260467

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| **Checklist**   * Have you completed as much information as possible? * Have you signed and dated the form? * Have you enclosed **TWO** forms ofappropriate proof of ID?   + Something that identifies you   + Something that confirms your address |

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| For Office Use Only: | |
| Date Permission to release form was received: |  |
| Date of Permission to release form identification verification check: |  |
| Name of employee who verified identification: |  |
| Name of employee allocated Permission to release form: |  |
| Date of Data Protection Officer’s Check: |  |
| Format and Date information was sent: |  |