

Personal Data Access Request Form

Section 1 – Your details (Please use block capitals throughout the form)

Surname:	
First Name(s):	
Previously known as (if applicable):	
Current address:	
Prior address (if applicable):	
Contact phone no:	
Contact email address:	

Section 2 – Your relationship with The Institute of Banking

<p>Please describe, in as much detail as possible the nature of your relationship with the Institute.</p> <p>Relevant points may be:</p> <ul style="list-style-type: none"> • Whether you are, or were, a member/ student/designate or member of a CPD scheme of the Institute; • Membership number and/or UCD Student ID number (if applicable); • If you are neither a current nor a former member/student/designate or member of a CPD scheme of the Institute, please indicate the nature of your relationship with the Institute. • Beginning and end dates of your relationship with the Institute (if applicable). 	
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Section 3 – Details of personal data requested

Please describe, in as much detail as you can, the nature of the personal data requested.

Possible points to consider are:

- Description of the likely personal data held;
- Likely location (i.e. the Institute department/function) where the records may be held;
- Any identifying references numbers, codes etc.;
- Likely dates of when the personal data was created within the Institute.

Section 4 – Identification

In order to process your application in accordance with best practice and the Institute's own internal procedures, it is necessary for you to provide proof of your identity. At least two forms of identification, selected from the list below, must accompany this application form.

- A recent utility bill (must be less than 6 months old at the time of application)
- Passport (page with your signature)
- Driving Licence (page with your signature)
- UCD Student ID Card

Please note that copies of any two of the above items will, in the majority of cases, suffice. However, the Institute reserves the right to request original documents where deemed necessary by the Data Protection Officer.

Section 5 – Agent Details (Please complete if applicable)

If you wish to appoint an agent (e.g. a family member, friend, solicitor or barrister) to act on your behalf in connection with your personal data access request please complete this section.

I confirm that I wish to appoint the individual named below to act on my behalf in relation to the personal data access request which is the subject of this form.

Agents Name:	
Agents Address:	
Agents Contact Phone No.:	
Agents Email Address:	
Relationship of agent to me:	

Section 6 – Declaration

I confirm that I am the data subject named in Section 1 above. In accordance with the Data Protection Acts, including the General Data Protection Regulation (Regulation (EU) 2016/679), I request a copy of the personal data held on me by The Institute of Banking. I also confirm that the details set out by me on this form are true and accurate.

Signed:	
Date:	

Post Completed Application Form (with ID) to:

Data Protection Officer
The Institute of Banking
1 North Wall Quay
Dublin 1

Office Use Only	
Request ref no.	
Date request received	
Proof of Identity provided	
Any other relevant comments	