



OMEGA MULTI-ACADEMY TRUST SUBJECT ACCESS REQUEST

Name of Academy: _____

Details of the information requested under the General Data Protection Regulation (GDPR):

Name of person making the SAR	
Child(ren) name(s) concerned	<i>If applicable Form/DOB/UPN</i>
Relationship with the school	<i>Please select: Pupil / parent / employee / governor / volunteer Other (please specify):</i>
Information requested/sent	<ul style="list-style-type: none"> • <i>Personnel file</i> • <i>Child's specific records</i> • <i>Emails (content, date, parties between)</i>
Date you requested the information	
Date the information was supplied	<i>This must be within one month of the above date</i>
Format we supplied the information	<i>For example, encrypted USB stick accompanying this letter</i>

Completed by:

Name: _____

Date: _____