



Ag Rialáil Gairmithe Sláinte  
agus Cúraim Shóisialaigh

Regulating Health +  
Social Care Professionals

# SUBJECT ACCESS REQUEST FORM

2023



## SUBJECT ACCESS REQUEST FORM

Under the General Data Protection Regulation, you are entitled as a data subject to obtain from CORU, confirmation as to whether we are processing personal data concerning you, as well as to request details about the purposes, categories and disclosure of such data.

You can use this form to request information about, and access to any personal data we hold about you. Details on where to return the completed form can be found at the end of the document.

### 1. Personal Details:

<b>Data Subject's Name:</b>		<b>DOB:</b>	___/___/_____
<b>Home Telephone No:</b>		<b>Email:</b>	

**Data Subject's Address:**

<b>Data Subject Category:</b> <i>(please tick)</i>	Registrant	<input type="checkbox"/>	Applicant <i>(Registration/Recognition)</i>	<input type="checkbox"/>
	Fitness to Practise Complainant	<input type="checkbox"/>	Registration Board Member <i>(incl. former)</i>	<input type="checkbox"/>
	CORU Employee <i>(incl. former)</i>	<input type="checkbox"/>	Council Member <i>(incl. former)</i>	<input type="checkbox"/>
	Assessor	<input type="checkbox"/>	External Service Provider	<input type="checkbox"/>
	Appellant	<input type="checkbox"/>	Other: <i>(please state)</i>	<input type="checkbox"/>

### 2. Specific Details of the Information Requested:

I am requesting:

- Confirmation of what personal data CORU holds about me
- Access to/copies of my personal data held by CORU
- Rectification (correction) of my personal data held by CORU
- Erasure of my personal data held by CORU
- To restrict the processing of my personal data by CORU



- To object to the processing of my personal data by CORU
- CORU transmit my personal data to another Controller/organisation\*

***\*Please provide full contact information for the receiving Controller/organisation in Box B below***

**A. Can you tell us the relevant period or timelines involved?**

(i.e. the relevant dates e.g. *01 January 2022 – 31 December 2022* for which you are seeking the personal data).

**B. Can you provide us with any other specific details that you feel are relevant in assisting us in locating your personal data? (e.g. application number)**

(by providing us with as much detail as possible in relation to your access request, we will be able to assist you more efficiently).



**3. Representatives** (only complete if you are acting as the representative for a data subject)  
*[Please Note: We may still need to contact the data subject where proof of authorisation or identity are required]*

<b>Representative's Name:</b>	<b>Relationship to Data Subject:</b>
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<b>Telephone No:</b>	<b>Email:</b>
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**Representative's Address:**

I confirm that I am the authorised representative of the named data subject:

<b>Representative's Name:</b>	<b>Signature:</b>
_____	_____

**4. Confirmation**

**Data Subject's Name:** \_\_\_\_\_ [print name]

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**5. Proof of Identity**

Depending on your relationship with CORU, we may require Proof of Identity to be provided with your completed Application Form. Please select which form of I.D. you are providing with your request:

PASSPORT                       DRIVING LICENCE

OTHER: \_\_\_\_\_



## 6. Completed Forms

***For postal requests, please return this form to:***

CORU Data Protection Officer  
George's Court,  
Infinity Building,  
George's Lane,  
Smithfield, Dublin,  
D07 E98Y

***For email requests, please return this form to:*** [DPO@coru.ie](mailto:DPO@coru.ie)

### FOR OFFICE USE ONLY

Date Request received:	
Response date:	
Identity confirmed:	