



PART 1: Details of requesting officer

Job title / name

Shoulder no:

Constabulary:

Address

Contact no.

Date:

DD

MM

YY

Signature:

PART 2: Details of the personal data sought

Specific information / personal data required:

Any other identifying information if not otherwise sought above (e.g. name, description):

Additional information attached to help identify individual?

YES

NO

If 'Yes' please specify



PART 3: Justification for request

Offence (please tick / complete as appropriate): -

- I am unable to specify offence due to risk of prejudice to case
AUTHORISATION IN SECTION 5 WILL NEED TO BE FROM THE RANK OF INSPECTOR OR ABOVE
- I am able to specify offence and details are below:-

Reason information is required:

I certify that: -

- the data is required for one of the following purposes and will not be used in any way incompatible with the purpose (please tick appropriate);
- non-disclosure would prejudice that purpose.

- Prevention or detection of crime
- Apprehension or prosecution of offenders
- Assessment or collection of tax, duty or imposition of similar nature

I confirm the following (please tick / specify as appropriate):-

- The individual **will not** be informed that the academy is the source of this data
- The individual **will** be informed that the academy is the source of their data
SPECIFY DETAILS IN THE BOX BELOW
- The individual **may** be informed that the academy is the source of their data
SPECIFY CIRCUMSTANCES IN THE BOX BELOW



Police requests for disclosure of personal data in the absence of a court order or otherwise enabled by Section 47 of the Children Act

PART 4: Disclosure

Preferred date by which personal data is required: -
DD MM YY

Specify how you wish to receive the information (please tick): -

- Secure email (please specify email address below)
THIS SHOULD BE IN THE RECOGNISED POLICE / GOVERNMENT FORMATS (eg .gsi / gsx / pnn)
 e-mail address: _____
- To be collected in person
WE WILL REQUIRE SUFFICIENT PHOTO IDENTIFICATION UPON ARRIVAL
- Post
WE MAY CHARGE FOR SPECIAL DELIVERY AS PERSONAL DATA MUST BE DISCLOSED SECURELY

PART 5: Details of authorising officer

Authorisation from a senior manager is required.

Where the offence cannot not be specified in PART 3, authorisation must be the rank of Inspector or above.

Job title / name: _____

Shoulder no: _____

Constabulary _____

Email: _____

Telephone no: _____

Date:
DD MM YY

Signature: _____

IF THE FORM IS ATTACHED TO AN EMAIL, THE APPLICANT'S AND AUTHORISING OFFICER'S RECOGNISED POLICE / GOVERNMENT FORMAT EMAIL ADDRESSES WILL SUFFICE AS SIGNATURES (For example .gsi / .gsx / .pnn)

Please ensure the information provided on this form is correct.
 It is an offence to unlawfully obtain or attempt to obtain personal data.
 In certain circumstances we may ask for further details to confirm authentication.