**Individual Rights Request Form (IRR)**

**Section 1:** **Details of the Individual**

|  |
| --- |
| Title: Click here to enter text.  First names: Click here to enter text.  Surname: Click here to enter text. |
| Former Surname (if applicable): Click here to enter text. |
| Date of Birth: Click here to enter text.  NHS Number (if known): Click here to enter text.  Current Address: Click here to enter text. |

**Section 2: Applicant details (if making a request on behalf of the Individual)**

Name: Click here to enter text.

Address: Click here to enter text.

Date of Birth: Click here to enter text.

Relationship to Individual in Section 1: Click here to enter text.

**Section 3: Further Information**

Information for deletion/amendment: Click here to enter text.

Reason for deletion/amendment: Click here to enter text.

Desired outcome: Click here to enter text.

**Section 4: Consent**

Please tick **one** of following boxes and sign below:

|  |  |
| --- | --- |
| a) I confirm I am the person mentioned in section 1 and I require access to my personal records. |  |
| b) I confirm I am the person mentioned in section 1 and I authorise the release of copies of my personal records (described in section 3) to the person mentioned in section 2. |  |
| c) I confirm that I am the person mentioned in section 2 and I have parental responsibility for the child in section 1. |  |
| d) I confirm I am the person mentioned in section 2 and have been authorised to an act as an agent/power of attorney for the person in section 1. The applicant must provide evidence to support this. |  |

**Please note that your request will not be processed unless two forms of identification are received and verified. Approved forms of identification are available on our website.**

Print Name: Click here to enter text.

Signature: Click here to enter text.

Date: Click here to enter text.

**Please return the form to the:**

Department of Data Protection and Information Governance

Leeds Community Healthcare NHS Trust

Stockdale House

Victoria Road

Leeds

LS6 1PF

**Or email:** [**ig.lch@nhs.net**](mailto:ig.lch@nhs.net)

For further information about how we process your data, please view our Privacy Notice here: <https://www.leedscommunityhealthcare.nhs.uk/about-us/access-to-information/how-we-use-information-about-you/>