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Information Security Architects Ltd. (ISA) subject access request form: individuals

Data Protection Act – Subject Access Request Form

The Data Protection Act gives you the right to receive a copy of the data/information we hold about you. You can also ask someone else to act on your behalf to ask for information. Please complete this form if you wish to see your data. You will also need to provide **proof of your identity**. Your request will normally be processed within one month upon receipt of a fully completed form and proof of identity.

Proof of identity:

We require proof of your identity before we can disclose personal data. Proof of your identity should include a copy of each of two documents such as your birth certificate, passport, driving licence, official letter addressed to you at your address (e.g. bank statement, recent utilities bill or council tax bill). The documents should include your name, date of birth and current address. If you have changed your name, please supply relevant documents evidencing the change.

Administration fee:

The ISA's policy is not to charge for Subject Access Requests. However, a 'reasonable fee' may be charged when a request is manifestly unfounded or excessive, particularly if it is repetitive. We may also charge a reasonable fee to comply with requests for further copies of the same information based on the administrative cost of providing the information.



Section 1

This is about the person's whose data is requested. If you are the data subject, please fill in your details (the data subject). If you are not the data subject and you are applying on behalf of someone else, please fill in the details of the data subject below and not your own. Please do NOT use this form if you have parental responsibility and are requesting information on behalf of your child. A separate request form is provided for those with parental responsibility.

Title:	Mr		Mrs		Ms		Miss		Other	
Surname / Family Name:										
First Name(s) / Forenames:										
Date of Birth:										
Address:										
Postcode										
Previous Address:										
Postcode										
Telephone Number(s):										

I am enclosing copies of the following documents as proof of identity							
Birth Certificate Driving Licence Passport An official letter to my address							
If none of these is available please email ISA at <u>compliance@isa.com.gh</u>							



Personal Information

If you only want to know what information is held in specific records please indicate in the box below.

Details:



Section 2

Please complete this section of the form with your details if you are acting on behalf of someone else (i.e. the data subject).

If you are **NOT** the data subject, but an agent appointed on their behalf, you will need to provide evidence of your identity as well as that of the data subject and proof of your right to act on their behalf.

Title:	Mr		Mrs		Ms		Miss 🛛	Other		
Surname / Family Name:										
First Name(s) / Forenames:										
Date of Birth:										
Address:										
Postcode										
Daytime Telephone Number(s):										

Please provide proof of identity as detailed on page 1.

I am enclosing copies of the following documents as proof of identity						
Birth Certificate Driving Licence Passport An official letter to my address						
If none of these is available please email ISA at compliance@isa.com.gh						

What is your relationship to the data subject? (e.g. legal representative, carer)
I am enclosing the following copy as proof of legal authorisation to act on behalf of the data subject:
Letter of authority Lasting or Enduring Power of Attorney
□ Other (give details)



Data Subject Declaration:

I certify that the information provided on this form is correct to the best of my knowledge and that I am the person to whom it relates. I understand that ISA is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.

Name:

Signature:

Date:

OR

Authorised person – Declaration (if available):

I confirm that I am legally authorised to act on behalf of the data subject. I understand that ISA is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.

Name:

Signature:

Date:

Warning: a person who unlawfully obtains or attempts to obtain data is guilty of a criminal offence and is liable to prosecution.

I wish to:

Receive the information in electronic format \Box (some files may be too large to transmit electronically and we may have to supply in CD format)

Receive the information by post*	Collect the information in person	П

*Please be aware that if you wish us to post the information to you, we will take every care to ensure that it is addressed correctly. However, we cannot be held liable if the information is lost in the post or incorrectly delivered or opened by someone else in your household. Loss or incorrect delivery may cause you harm if the information is 'sensitive'.



Please send your completed form and proof of identity to:

Information Security Architects Ltd. No.8 Lomo Adawu St. La – Accra

OR

compliance@isa.com.gh

ISA will retain the information provided and only share the information with those it is legally entitled to. The information will only be retained for as long as necessary and in accordance with ISA's retention policy and will be disposed of in a safe and secure manner.

