

**Form 6 – For individuals applying for access to non-health related information including Emails**

**ACCESS UNDER THE DATA PROTECTION ACT 1998 (SUBJECT ACCESS REQUEST)**

- 1. Full name (including former name(s): (Mr/Mrs/Miss/Ms.....  
Name .....
  
- 2. Date of Birth: .....
  
- 3. Current Address: .....  
.....  
.....  
.....  
Tel num: (incl Area Code).....  
**Email address:**.....  
.....

**IMPORTANT INFORMATION**

- 4. Under the Data Protection Act 1998 you do not have to give a reason for applying for this information. However, to help us save time and resources, please provided below any information that will identify the data you believe we hold. This may include specific dates, along with details which you may feel have relevance. If you wish the Trust to include Emails then please complete Section 5 of this form and note the information regarding the search.

.....  
.....  
.....  
.....  
.....

5. Email Search

The team will obtain a copy of all of the required mailboxes from the most recent data and a search of these mailboxes for all relevant emails based on the scope of the request will be completed.

Please note that this process examines only those emails that are within the named member of staff's mailbox. It does not cover .PST files that may be stored elsewhere, e.g. on local hard drives. Obviously, it cannot identify emails that have been permanently deleted, i.e. those deleted from the Deleted Items folder. We are unable to search mailboxes relating to clinical teams, it must be a named staff member. We are unable to search mailboxes relating to staff who have left the employment of the Trust.

Time Period:	
Key Words *	
Named Staff Member's Mailbox to be checked	

\*Keywords – we only search for your first and surname and any specific phrase. We are unable to search for nicknames, job titles or general phrases.

**6. Identification:**

We cannot process your application without proof of identity. If you are an existing employee of the Trust then the request should be made via your Trust email (identification will then not be required)

Alternatively, please indicate which of the following identification documents are enclosed

**Important note.** Please do not forward original documents, as we regret that we cannot assume responsibility for their safety. Photocopies or scans are perfectly acceptable.

Driving Licence or Passport/Birth Certificate  
And additional proof of address e.g utility bill

I am applying to access information held about me by the Trust under the Data Protection Act .

Signed: .....

Date: .....

Please return this form with your ID either by email to [dpa@nsft.nhs.uk](mailto:dpa@nsft.nhs.uk) or by post to Compliance Team, Hellesdon Hospital, Kestrel House, Drayton High Road, Norwich, NR5 5BE.