

HOW TO APPLY – APPLICATION TO ACCESS YOUR PERSONAL DATA (SUBJECT ACCESS REQUEST)

- **FULLY COMPLETED APPLICATION FORM:** Ensure all sections are completed in BLOCK CAPITALS. Fields that are not applicable should be marked N/A. Original signatures are required throughout.
- **SUBMIT FORM:** Scan your completed application form and an acceptable form of identification and email us to datarequests@royalgib.police.gi
- **ACCEPTABLE FORMS OF IDENTIFICATION:** Passport and ID card will be accepted as valid forms of identification providing they clearly show your photograph, personal information, expiry date and nationality.
- **SIGNED APPLICANT'S DECLARATION:** Original signatures are required throughout.
- **COLLECTION:** SAR Certificates will be sent via e-mail to the e-mail provided.

**NO CERTIFICATES CONTAINING SENSITIVE PERSONAL DATA WILL BE ISSUED TO NON-APPLICANTS.
NO CERTIFICATE WILL BE ISSUED FOR EMPLOYMENT PURPOSES LOCALLY.**

Further information on Pre-Employment Vetting and GDPR Data Protection Rights of Individuals can be obtained from the Gibraltar Regulatory Authority (GRA) www.gra.gi

FOR OFFICE USE ONLY

Certificate No.:		Date:	
Date Collected:	DD / MM / YYYY	Issued By:	
Signature of Person Collecting:			
Name of Person Collecting:			
<input type="checkbox"/> There are no previous convictions recorded against the applicant	OFFICE STAMP		
<input type="checkbox"/> Attached, please find conviction(s)			

PERSONAL INFORMATION

Title:	Mr. Mrs. Miss. Ms. Other (please specify):
Forename(s):	
Surname(s):	
Previous Name:	
Date of Birth:	DD / MM / YYYY
Place of Birth (Including Town and Country):	
Passport or Identity Card Number:	

CONTACT DETAILS

NOTE: Providing these details may reduce any delay in processing your application should the RGP need to contact you to clarify any of the information you have given. By providing these details, you give consent for the RGP to contact you by this method.

Contact Tel No. 1:		Contact Tel No. 2:	
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Email Address:	
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Current Address: (This is the current address at which you reside not a PO Box)	
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ADDRESS HISTORY

Note: Please state all addresses applicant has resided at during the last seven years. If Applicant has moved to Gibraltar from abroad within the last five years please state last address prior to moving to Gibraltar.

ADDRESS	DATE FROM (mm/yyyy)

REASON FOR APPLYING

Please specify:	
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APPLICANT DECLARATION

The information I have supplied in this application is correct and I am the person to whom it relates. By signing this form I accept the terms and conditions and I confirm that I wish to be supplied with information held about my conviction history by the Royal Gibraltar Police.

Signature: _____

Date: _____

A person who impersonates or attempts to impersonate another person may be guilty of an offence.

PRIVACY NOTICE

The information supplied in connection with this application will be used to administer this request and will be retained for a period not exceeding 2 years. The Royal Gibraltar Police processes all personal information in accordance with the General Data Protection Regulation and Data Protection Act 2004.

Further information in relation to this can be found on our website www.police.gi