



WAUBONSEE
COMMUNITY COLLEGE

*Office of the Chief Information Officer /
Data Protection Officer*

GDPR Subject Access Request Form

If your data is subject to the GDPR and you want Waubonsee Community College to provide you with a copy of any personal data we hold about you, please complete this form and send it to the address below. You are currently entitled to receive this information under the European Union’s General Data Protection Regulation (GDPR). We will also provide you with information about any processing of your personal data that is being carried out, the retention periods which apply to your personal data, and any rights to rectification, erasure, or restriction of processing that may exist.

Please note: this form shall only be completed by individuals who are subject to the European Union’s General Data Protection Regulation (“GDPR”). You are subject to the GDPR if you submit this form to Waubonsee Community College while you are located in any of the following European Union Member States: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, or United Kingdom.

The information you supply in this form will only be used for the purposes of identifying the personal data you are requesting and responding to your request.

Please send your completed form and proof of identity via email to GDPRcompliance@waubonsee.edu.

Full Legal Name:	
Current Address:	
Country of Residence:	
Email Address:	
Telephone Number:	
Are you currently located within the EU (countries listed above)?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Relationship to WCC:	<input type="checkbox"/> Current/Former Student <input type="checkbox"/> Current/Former Faculty or Staff <input type="checkbox"/> Other, Please specify:
----------------------	---

To ensure we are releasing data to the right person, we require you to provide us with proof of your identity. Please supply us with a scanned image of one of the following: passport, driver's license, state ID card, or birth certificate.

What information are you seeking? Provide any relevant details you think will help us to identify the information you require.

I confirm that I have read and understood the terms of this Data Subject Access Request Form and certify that the information given in this application to Waubonsee Community College is true. I understand that it is necessary for Waubonsee Community College to confirm my identity and it may be necessary to obtain more detailed information in order to locate the correct personal data.

Signature: _____

Date: _____

Attachments:

I am enclosing the following copies as proof of my identity:
