

1. Requestor details

Name	
Job title	
Organisation	
Address	
Telephone/mobile number	
Email	

2. Data Subject's details

Name	
Address	
Other identifying information	
Specific information required	

3. Information Supporting Disclosure

Offence: Unable to specify offence due to risk of prejudice to case <input type="checkbox"/>
Reason information is required

State under which powers you are requesting the information

I certify that the data is required for one of the following purposes (please tick as appropriate and non-disclosure would prejudice that purpose. I also certify that it will not be used in any way incompatible with the purpose:

- Prevention or detection of a crime
- Apprehension or prosecution of offenders
- Assessment or collection of tax, duty or imposition of similar nature

4. Disclosure

How would you like to receive the information?

- Post
- Email
- Collection (please note that we will require sufficient identification)

Please indicate the timescale in which the information is required
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5. Authorisation

Requestor	College/business unit name:
Signature: Date: I understand that if any information given on this form is incorrect, I may be committing an offence under the Data Protection Law Enforcement Directive	Information released? YES/NO Name: Job Title: Signature: Date: