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| REQUEST FOR ACCESS TO INFORMATION FROM SCOTTISH POLICE AUTHORITY | | | | | | |
| **SCOTTISH POLICE AUTHORITY** | | | | | | |
| Subject to certain exemptions, the Data Protection legislation affords you the right to be told whether any information is held about you and a right to obtain a copy of that information and the purpose for which we hold your data. | | | | | | |
| If you only need a copy of your **unspent** conviction history, this can be obtained by applying to Disclosure Scotland, 1 Pacific Quay, Glasgow, G51 1EA (Tel: 0141 585 8495) who will provide you with a Criminal Conviction Certificate (a Basic Disclosure). This Certificate can also be obtained online. | | | | | | |
| PLEASE NOTE THAT IF YOU REQUIRE A TRAVEL/RESDIENCY VISA YOU SHOULD CONTACT ACRO CRIMINAL RECORD OFFICE AT: [www.acro.police.uk](http://www.acro.police.uk) Tel. 02380 479 920 | | | | | | |
| If you require a Criminal Record check you should contact the Police Service of Scotland at [dataprotectionaberdeen@scotland.pnn.police.uk](mailto:dataprotectionaberdeen@scotland.pnn.police.uk)  Please complete all the sections below and return this form to Data Protection, Scottish Police Authority, 1 Pacific Quay, Glasgow G51 1 DZ or email DPO@SPA.pnn.police.uk. | | | | | | |
| A response will be provided within one month of receipt of the completed form and proof of identity. | | | | | | |
| PROOF OF IDENTITY | | | | | | |
| To help us establish your identity, your application should be accompanied by two official documents e.g. birth/adoption certificate, driving licence, passport, utility bill from last 3 months. At least one must record your current address. Any original documents will be returned with our reply to your request. Please note, the SPA cannot accept liability for the loss of documents in transit. Please note: photocopies/scanned copies are acceptable. It is essential that there is confirmation of your date of birth and recent address. | | | | | | |
| Note: The Chief Executive will only provide information if he/she is fully satisfied as to your identity. | | | | | | |
| YOUR PERSONAL DETAILS (please use block capitals) | | | | | | |
| **TITLE** | Mr/ Mrs /Miss/ Ms/Dr | | | **SURNAME** | |  |
| **FIRST NAMES** | | |  | | | |
| **OTHER/FORMER/MAIDEN NAMES** | | |  | | | |
| **COUNTRY & PLACE OF BIRTH** | |  | | |  | |
|  |  | | |  | |  |
| **HOUSE NUMBER**  **ADDRESS** | | |  | | | |
| **POST CODE** | | |  | | | |
| **PREVIOUS ADDRESES GOING BACK 5 YEARS IF YOU HAVE LIVED AT THE ABOVE ADDRES FOR LESS THAN 3 YEARS** | | | | | | |
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| (Continue on a separate piece of paper if necessary) | | | | | | |
| A TELEPHONE NUMBER AND/OR EMAIL ADDRESS SHOULD BE PROVIDED IN CASE WE NEED TO CONTACT YOU IN RESPECT OF THE REQUEST. | | | | | | |
| Telephone Number: | | |  | | | |
| Email Address: | | |  | | | |

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| INFORMATION REQUESTED | | | |
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| NB. SPA cannot provide information from police operational systems or in respect of police incidents | | | |
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| The information which I have supplied in this application is correct and I am the person to whom it relates. | | | |
| Signed by: | | | |
| If you are authorising someone to act on your behalf, written confirmation of authority must be enclosed. Solicitors must enclose a signed mandate. A copy of Power of Attorney should be provided where appropriate | | | |
| WARNING: | | | A person who impersonates or attempts to impersonate another commits an offence |
| THIS SECTION IS FOR OFFICIAL USE ONLY | | | |
| **This section MUST be completed by SPA staff** | | | |
| Date Received: | | |  |
| Checked/Legible: \*YES/NO | | | |
| Details of Identification Documents: | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Documents Checked & Photocopied: | | | \*YES/NO |
| Date Documents Returned to applicant: | | | |
| DETAILS OF PERSONNEL RECEIVING THE FORM | | | |
| Name: | Grade/Rank: | Register/ Pay No: | |
| Designation | | | Location\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature | | | Date: |
| Please ensure that all the aforementioned details are complete prior to forwarding the application form, within 24hrs, to the Data Protection Officer at Pacific Quay | | | |
| *All information collected in this form will be processed in line with data protection law. For further information on how SPA processes your personal data, please see its privacy notice at http://www.spa.police.uk/about-us/privacy/* | | | |