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| **RESPONSE TO REQUEST FOR ACCESS TO DATA (RAD2)**  **UNDER Sch2, Part 1 Para 2 OF THE DATA PROTECTION ACT 2018**  **(RESTRICTED)** |

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| To | **Click here to enter text** |
|  |  |
| Your Reference: | **Click here to enter text** |
|  |  |
| Our Reference: | **Click here to enter text** |
|  |  |
| Date: | **Click here to enter text** |
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| **RAD Protocol** | |
| **This response is made in relation to your Request for Access to Data (RAD1) form dated** | **Click here to enter date** |

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| **Details of responder** | | | | | |
|  | | | | | |
| Name of responding organisation: | | **Click here to enter text** | | | |
|  | | | | | |
| Address of responding organisation: | | **Click here to enter text** | | | |
|  | | | | | |
| Name of responder: | | **Click here to enter text** | | | |
|  | | | | | |
| Job title of responder: | | **Click here to enter text** | | | |
|  | | | | | |
| Contact Telephone Number: | **Click here to enter text** | |  | Contact Email: | **Click here to enter text** |

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| **Details of data subject** (for multiple subjects please complete multiple boxes, by unprotecting sheet and copying and pasting a new data subject box in) | | | | | |
|  | | | | | |
| Identity of data subject: | | **Click here to enter text** | | | |
|  | | | | | |
| Date of birth: | **Click here to enter text** | | OR | National Insurance number: | **Click here to enter text** |
|  | | | | | |
| Address : | | **Click here to enter text** | | | |
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| **Response to request under Sch2, Part 1 Para 2 of the Data Protection Act 2018** | | | | |
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| **Mark as appropriate** | | | | |
|  | **We are able to disclose all of the information requested by you.** | | | |
|  | |  | | |
|  | **We can only disclose part of the information requested by you (detailed in text box below).** | | | |
|  | **No we We cannot disclose any of the information requested by you because:** | | | |
|  | | | | |
|  | | |  | We do not possess the information you have requested. |
|  | | | | |
|  | | |  | The exemption set out in Sch2, Part 1 Para 2 to the Data Protection Act 2018 does not apply to the requested information (please include details in the box below giving reasons as to why the exemption does not apply to the requested information). |
|  | | | | |
| **Click here to enter text** | | | | |

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| **The information we enclose / attach is:** |
| **Click here to enter text** |

|  |  |
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| **Reciprocal Request**  **Mark if appropriate** | |
|  | |
|  | Given the content of the attached information we have provided to you we wish to make our own request for access to personal data under Sch2, Part 1 Para 2 of the Data Protection Act 2018 and direct your attention to the attached Request for Access to Data (RAD1) form. |

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| **DECLARATION** | | | | | | | | |
| This information attached is provided pursuant to Sch2, Part 1 Para 2 of the Data Protection Act 2018.We would caution against automatically presuming that any of the individuals mention in the attached information is guilty of an offence.  Please note that the attached information provided to you should be processed in accordance with the Data Protection Act 2018 and should be used for the purposes specified | | | | | | | | |
| in your Form RAD1 dated | | **Click here to enter text** | | | | Only. | | |
| In accordance with the provisions of the Data Protection Act 2018, please treat all of the attached information provided to you pursuant to your request as set out in your Form RAD1 dated as above in confidence and destroy securely any data that is not relevant or applicable to the purposes stated in that Form RAD1  The attached information and any other related material or intelligence received from a third party must not be disclosed further without our prior written approval and the prior written approval of the relevant third party.  This Response to Request for Access to Data (RAD2) Form should be signed and completed by the person disclosing the information on behalf of the responding organisation. | | | | | | | | |
| Name: | **Click here to enter text** | |  | |  | | |  |
|  | | | | | | | | |
| Organisation: | **Click here to enter text** | |  | Date: | | | **Click here to enter text** | |
|  | | | | | | | | |
| Optional Countersignature (if required by responder’s internal procedures)  The disclosure of the information attached is agreed and counter signed by | | | | | | | | |
| Name: | **Click here to enter text** | |  |  | | | | |
|  | | | | | | | | |
| Organisation: | **Click here to enter text** | |  | Date: | | | **Click here to enter text** | |