

MDS Data Subject Access Request

Please complete this form if you wish to request access to your personal data. You do not have to use this form, but it will help us to deal with your request as quickly and effectively as possible if you do.

You can also use this form if you are requesting access to personal data on behalf of someone else. In that case, we will need you to confirm you have that person's authority to ask for access to their data.

If you have any questions about this form or your request, please contact casermanager@mdsuk.org to discuss it further.

1 **About you**

Please provide the following information. If you have an MDS number or GMC number, please provide it.

Full name	
Address	
Contact details	
MDS or GMC number	

For security reasons, we cannot respond to a request unless we have confirmed your identity. Please provide:

- A certified copy of photo identification such as a passport or driving license
- Proof of address such as a utility bill or financial statement

2 **Whose personal data are you requesting?**

Please provide the following information. If you are making this request on behalf of someone else, we will need this information before we can supply you with the data you are asking for.

www.mdsuk.org

MDS office, The Chapel, Trinity Gardens, 9-11 Bromham Road, Bedford, MK40 2BP

MDS is a trading name for Medical Defence Shield Limited which is part of the BAPIO Group.

Companies House Reg No: 07146069

Are you requesting access to your own personal data?	<input type="checkbox"/> Yes, please go to section 0 below. <input type="checkbox"/> No, please complete the rest of this section of the form.
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2.1 If you are not requesting access to your own personal data, please provide the following information about the person on whose behalf you are making this request:

Full name	
Address	
Contact details	
MDS or GMC number	

We cannot respond to your request until we also receive satisfactory confirmation of the identity of the person on whose behalf you are making this request. Please provide:

- A certified copy of photo identification such as a passport or driving license
- Proof of address such as a utility bill or financial statement

2.2 Please provide a copy of your legal authority to make this request. This might be a signed letter of authority from the person on whose behalf you are making this request, a power of attorney, or confirmation that you are their legal representative.

3 **What data are you requesting?**

Your rights to request access to personal data and other information are set out in our Privacy policy, available on our website. Please describe what personal data and other information you are requesting, in particular if you are asking for specific documents or information.

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<p>Description of the personal data and information requested including details of any specific documents or information you are asking for (where relevant)</p>	
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Please give as much detail as possible about where the data might be located and any other relevant information. You do not have to provide this information, but doing so will help us to deal with your request as quickly and effectively as possible.

<p>Location of data, eg any particular departments or parts of the organisation you have dealt with (if known)</p>	
<p>Relevant time periods, eg when we are likely to have obtained your data (if known)</p>	
<p>Dates of any particular correspondence, meetings or telephone calls (if known)</p>	

The name(s) of people you have dealt with within our organisation (if known)	
Any other relevant information you can think of that might help us respond to your request	

4 Signature

Please check the information you have provided and sign below.

Signed	
Date	

Please send this form and the documents we have asked you to provide to:

Sarah Dodds
 Head of Legal
 Medical Defence Shield
 The Chapel, Trinity Gardens
 9 – 11 Bromham Road
 Bedford MK40 2BP
casermanager@mdsuk.org

If you are making this request by email, we will provide the information to you in an electronic format unless you ask us not to. If you wish to receive your information in a different format, eg hard copy please let us know in the box below.

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