



DIOCESE OF **Hexham & Newcastle**

## CARE RECORD ACCESS REQUEST FORM – DECEASED PERSON

*This form should be completed when wishing to access information about a deceased person who may have been in the care of the Diocese of Hexham and Newcastle prior to 1982. If the person about whom you are requesting information is living, you should complete a Care Record Subject Access Request Form.*

### SECTION ONE

Please complete the section below with your details.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms Other (please specify):	
First name		
Surname		
Address		
	Postcode	
Email address		
Tel no		
Date of birth		

Please include a copy of one of the following as proof of identity (tick which one applies):

Passport	<input type="checkbox"/>	Driving licence	<input type="checkbox"/>	Other photo ID	<input type="checkbox"/>
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### SECTION TWO

Please complete below the details of the person you are requesting information about. **To evidence that the person is deceased, a copy of the death certificate must be provided.**

First name	
Surname	
Date of birth	

Please explain your relationship to the deceased and provide necessary evidence to demonstrate your entitlement to access their personal data. If you are unsure about what to provide, please contact us.

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### SECTION THREE

Please provide us with further information about the family member to help us identify the information you require.

#### Details at the time of going into care

First name		
Surname		
Address (if known)		
	Postcode	

#### Approximate dates in care:

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#### Name of the care home(s) lived in if known?

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Please use the section below to give any additional details about the information you are requesting that may help us: (e.g. details about siblings/family of the deceased)

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## SECTION FOUR

The information supplied in this application is correct and I understand that the Diocese may need to obtain further information from me in order to comply with this request.

Signature	
Date	

This form should be completed and sent with all accompanying documents to [data.protection@diocesehn.org.uk](mailto:data.protection@diocesehn.org.uk) or by post to: The Diocese of Hexham and Newcastle, Data Protection Team, St Cuthbert's House, West Road, Newcastle upon Tyne, NE15 7PY.

The information you have provided on this form will be stored and used by the Diocese of Hexham and Newcastle only for purposes relating to managing care file access requests. Details of how we process your data, and your rights, are included in the Diocesan Privacy Notice which can be accessed at [www.diocesehn.org.uk/privacy-policy/](http://www.diocesehn.org.uk/privacy-policy/) or by request on 0191 2433317 or at [data.protection@diocesehn.org.uk](mailto:data.protection@diocesehn.org.uk)

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FOR OFFICIAL USE ONLY

ID	
Received by	
Date received	
Actioned by	
Actioned date	