



Right to Rectification Request Form

Under the General Data Protection Regulation (GDPR) you have the right to request the correction of your personal data, if you consider any information within your records to be inaccurate. This is known as the right to rectification. You can use this form to ask for your personal data to be corrected.

For minor corrections, such as fixing a spelling mistake or updating a phone number / address details, you do not need to make a data rectification request. These issues can usually be resolved directly with your local health service.

Please note: The right to rectification is not absolute. For further information please see Data Protection Commission Guideline: [Can I Use the GDPR to have my medical records amended or erased? | Data Protection Commissioner](#).

Please complete this form providing as much detail as possible. Please send your completed request form, copies of relevant identification and supporting documentation via email to the appropriate contact listed in the [contact list](#).

SECTION 1: Details of the person requesting correction

Full name:

Any previous names:

Address:

Contact phone number:

Email address:

Date of birth:

Hospital Chart No. (if applicable):

SECTION 2: Are you data subject?

Please tick appropriate box

Yes, I am the data subject. Please include a copy of a valid photo ID (passport or driver's licence).

No, I am acting on behalf of the data subject. Please provide written authorisation from the applicant to act on their behalf.

SECTION 3: Details of data subject (if different from section 1)

Full name:

Any previous names:

Address:

Contact phone number:

Email address:

Date of birth:

Hospital Chart No. (if applicable):

SECTION 4: Details of request

Document or record name / description:

Service unit or department (e.g. hospital or facility):

Date of record or timeframe:

What information do you wish to rectify?

Reason for the rectification:

PLEASE SIGN HERE

Signature

Date

Documents which must accompany this application:

Evidence of your identity (see section 2)

Evidence of the data subject's identity (if different from above)

Authorisation from the data subject to act on their behalf (if applicable)