Data Request Form – Data Subjects

St. Cloud State University

Date of request: _____

To request data as a data subject, you must show [*a valid state ID*, *such as a driver's license*, *military ID*, *or passport*] as proof of identity.

I am requesting access to data in the following way:

Note: inspection is free but we will charge for copies when the cost is over \$10.00.

□ Inspection

Copies

Both inspection and copies

These are the data I am requesting:

Note: Describe the data you are requesting as specifically as possible. If you need more space, please use the back of this form.

Contact Information
Data subject name
Parent/Guardian name (if applicable)
Address
Phone number Email address
Signature of Data Subject or Parent/Guardian
Staff Verification
Identification provided

St. Cloud State University will respond to your request within 10 business days.