**Access to Records – your authorisation to share your information**

We have received a request for copies of the personal information we hold about you to be provided to your representative.

Some of this information may be sensitive. Before we share your information we would like your consent to do so. Please tick the boxes below to tell us how you would like us to handle this request:



[ ]  I agree to my information being shared



[ ]  I would like you to call me to discuss information I do not want shared. Please call me on ……………………………….

[ ]   I do not want my information shared

If you have any concerns about sharing your information, please call us on 033301 39853.

I confirm I have made my own decision about sharing my information.

Name:

Signature:

Contact Number:

Date:

If we believe any data within your records is particularly sensitive we will contact you to discuss before providing to your representative.

Please return this form to: transparencyteam@essex.gov.uk

Or post to: Transparency Team. PO Box 11. County Hall. Chelmsford. Essex CM1 1QH