



Data Subject Complaint Form

About

In addition to the rights and freedoms provided by the UK General Data Protection Regulation and Data Protection Act 2018, the Data (Use and Access) Act 2025 provides data subjects with the right to complain to organisations if they think their personal information has been used in a way that does not comply with the law.

This form is intended for data subjects who wish to file a formal complaint regarding the handling of their personal data by Wolfson College in the University of Oxford, in accordance with the Data (Use and Access) Act 2025. The form should be completed by the data subject.

If you believe your rights have been infringed or your data have been mishandled, please raise the issue informally with the College Secretary in the first instance if possible, or complete this complaint form and submit it to the College Secretary at dpo@wolfson.ox.ac.uk. The College will endeavour to respond to your complaint within 30 calendar days.

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SECTION 1: Your details

Full name	
Date of birth	
Email address	
Contact number	
Postal address	

SECTION 2: Your preferred method of contact

Email Phone Postal mail

SECTION 3: Complaint details

What is your relationship to Wolfson College?

Student Fellow Staff Member of Common Room Alumni

Visitor Other: _____

Type of personal data involved (tick all that apply):

<input type="checkbox"/> Name	<input type="checkbox"/> Financial data
<input type="checkbox"/> Contact information	<input type="checkbox"/> Health data
<input type="checkbox"/> Academic records	<input type="checkbox"/> Biometric data

Other personal data:

Please describe the issue in detail, including relevant dates and context:

Have you contacted Wolfson College about this issue previously?

Yes No

If yes, please provide the date and outcome of that communication:

SECTION 4: Desired Outcome

What outcome are you seeking?

- | | |
|--|--|
| <input type="checkbox"/> Access to personal data | <input type="checkbox"/> Data portability |
| <input type="checkbox"/> Correction of inaccurate data | <input type="checkbox"/> Objection to processing |
| <input type="checkbox"/> Erasure of data | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Restriction of processing | |
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SECTION 5: Supporting Documentation

Please attach any relevant documents or evidence:

- Correspondence with the College
 - Submitted access or deletion requests
 - Screenshots or written evidence
 - Proof of identity (if not already known to the College)
 - Other: _____
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SECTION 6: Declaration

I declare that the information provided in this form is accurate and that I am the individual to whom the data relates, or am authorised to act on their behalf and have provided documentation which demonstrates this and proves my identity.

Signature: _____

Date: ____ / ____ / ____

Please submit this form to the College Secretary at dpo@wolfson.ox.ac.uk or by post to
Wolfson College, Oxford, Linton Road, Oxford, OX2 6UD.