

**Declaration**

I hereby declare and confirm that all information and supporting documents provided by me in connection with this Request are true, accurate and complete. I understand that it will be necessary for QQI to verify my identity and that QQI may contact me for more detailed information in order to process my request. I consent to the collection, use and disclosure of the personal data that I have provided in this form for the purpose of this request.

Name: (BLOCK CAPITALS)

Signature:

Date:

For Internal Use

Application Reference Number

Linked Reference Number if the data subject has made a previous request

Received by:

Date:

Referred to:

Date:

Date Request Completed:

Date Requestor Informed:

Comments: