



## FORMER STAFF DATA ACCESS REQUEST FORM

IN ORDER TO ENSURE AND MAINTAIN THE INTEGRITY OF ALL FORMER STAFF MEMBER'S DATA, IF APPROVED, ONLY COPIES OF THE REQUESTED DATA WILL BE PROVIDED.

**DIRECT ACCESS TO THE REQUESTED DATA WILL NOT BE GRANTED**

PLEASE COMPLETE THE FOLLOWING INFORMATION. A SEPARATE FORM MUST BE COMPLETED FOR EACH INDIVIDUAL REQUESTING ACCESS TO A FORMER STAFF MEMBER'S DATA.

### REQUESTOR INFORMATION:

NAME (PLEASE PRINT): \_\_\_\_\_

TITLE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WORK LOCATION: \_\_\_\_\_

PHONE #: \_\_\_\_\_

### FORMER STAFF MEMBER INFORMATION:

NAME: \_\_\_\_\_

JUSTIFICATION FOR REQUEST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### DATA ACCESS REQUESTED (CHECK ALL THAT APPLY)

☐ EMAIL

☐ MICROSOFT ONEDRIVE

☐ GOOGLE DRIVE

☐ LOCAL PC FILES (LAPTOP, DESKTOP, ALL-IN-ONE) ASSET TAG#: \_\_\_\_\_

☐ OTHER PLEASE SPECIFY: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF REQUESTOR

\_\_\_\_\_  
DATE

**PLEASE RETURN THE COMPLETED FORM TO THE HELP DESK – QUESTAR III CENTRAL OFFICE**

# FORMER STAFF DATA ACCESS REQUEST FORM

SIGNATURE OF PROGRAM / DEPARTMENT DIRECTOR

DATE \_\_\_\_\_

SIGNATURE OF HUMAN RESOURCES DIRECTOR

DATE \_\_\_\_\_

SIGNATURE OF CHIEF INFORMATION SECURITY OFFICER

DATE \_\_\_\_\_

SIGNATURE OF DATA PROTECTION OFFICER

DATE \_\_\_\_\_

**IT DEPARTMENT USE ONLY**

NOTES: