

Subject Access Request Form



I, (Name of Client)

Request from: **Mrs Jan Harper MBACP (Accred)**
CBT Counsellor & Psychotherapist
Blossom Counselling Email: jan@blossomcounselling.co.uk
Telephone: 07950 229711 Website: www.blossomcounselling.co.uk

The following information relating to my Counselling which took place with you

- General Contact Information held about me
- Brief Case Notes compiled during the counselling process

I understand that this request will be responded to within thirty days of it being received by Jan Harper and that there is no charge for this information. I

I request that the information should be communicated to me in the following way:

- Electronically** - to be sent to my private email address which is:

Email :

- In **printed hard copy format** to be posted to me at the following address, marked for my personal attention:

Address:

.....

I take responsibility for the safe interception of this information in the format I have specified

Client Print:

Date:

Client Sign: