

2025 ANNUAL REPORT FORM (Please note this form now includes GDPR Data Mapping)

THIS FORM SHOULD BE COMPLETED <u>IN FULL</u> BY ALL WIS AND RETURNED to the LFWI Office immediately after your Annual Meeting, along with your Financial Statement

	PRESIDENT) FOR THE PAST YEAR SECRETARY)	
Signed on behalf of the Committee:		
Training Requirements. Are there any specific topic	s you would like to be included?	
We do not meet in (month)		
Time:		
Week in month:		
Monthly meetings: Day		
Is there disabled access?		
Contact for booking purposes:		
Maximum capacity		
Is it suitable for Federation events?		
Your WI Venue address including postcode:		
Please give details		
Do you have any members willing to serve on LFW committees or train to be a WI Adviser?	I Teams formerly known as sub-	
Facebook/Instagram address:		
Your WI Website address:		
Annual Meeting Date:		
Number of members:		
Name of WI		

WI OFFICER INFORMATION

IMPORTANT: PLEASE COMPLETE ALL THE FOLLOWING INFORMATION AS THERE MAY BE CHANGES THE OFFICE IS UNAWARE OF.

Please make each person aware that by providing this information they are giving permission for their details to be used by LFWI solely for WI purposes

Climate Ambassador		
Name	Telephone	Email
Programme Secretary		
Name President:	Telephone	Email
Name		
Address		
Postcode	Telephone	
Email		
Secretary:		
Name		
Address		
Postcode	Telephone	
Email		
Treasurer:		
Name		
Address		
Postcode	Telephone	
Email		

EXAMPLE DATA MAPPING FORM

THIS IS ONLY AN EXAMPLE- IT CAN BE ADAPTED IT TO SUIT YOUR REQUIREMENTS

Group/Organisation Name & Compiler

Goodplace WI, Karen Anybody

Document description

List of agreed contact details - e.g., List of members

Purpose of information (data)

Contacting members/sharing info, visiting, cancelling meetings, special occasion cards etc.

What information is held?

Telephone nos./ addresses, email addresses

Do you hold any special data?

For example, medical allergies

Yes - for 1 person with epilepsy. (Reason: awareness measures)

Where & how is the data held?

e.g., drawer/filing cabinet/electronically

On a personal laptop

What security measures are in place to prevent unauthorised access

e.g., locked drawer/filing cabinet

Password protected

How many people hold the data?

e.g., Committee (no more than 3 people is advised)

President/Secretary/Treasurer

How long is the data kept?

Until the person is no longer a member or until a member requests its removal

How often is the data list reviewed?

By whom?

List is updated annually and when a person wishes to be removed from the list.

By MCS Representative/Secretary

Who is responsible for the destruction of the data and how is this done?

e.g., Deletion/shredding

MCS Representative /Secretary - it is permanently deleted from the laptop/shredded

Is any of your data available to anyone outside your organisation

No



LFWI DATA MAPPING FORM

Group/Organisation Name & Compiler
Document description
Purpose of information(data)
What information is held?
Do you hold any special data?
Where & how is the data held?
What security measures are in place to prevent unauthorised access?
How many people hold the data and how long is the data kept?
How often is the data list reviewed and by whom?
Who is responsible for the destruction of the data and how is this done?
Is any of your data available to anyone outside your organization?
Date this form completed