# REQUEST FORM FOR THE EXERCISE OF RIGHTS

articles 15-22 of Regulation (UE) 2016/679

**The undersigned, attaching an identity document**

|  |  |
| --- | --- |
| First name |  |
| Last name |  |
| Place of birth |  |
| Date of birth |  |
| Reply contact details |  |

aware of the rights set forth in Articles 15-22 of Regulation (EU) 2016/679 (GDPR) and the criminal sanctions referred to in the art. 76 of the Presidential Decree 28 December 2000 n. 445 under their own responsibility

**DECLARES THEIR INTENT TO EXERCISE THE FOLLOWING RIGHT(S):**

*(specify the subject of the request and which right(s) you intend to exercise)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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This request concerns (indicate the relationship with the organization (e.g. candidate), the personal data, the categories of data or the processing referred to): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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*NOTE: Send the completed document to the contact details in the privacy notice.*