

		Document category	CONFIDENTIAL WHEN COMPLETED	Document code:	E.Π.01.00.08	
			SUBJECT'S RIGHT REQUEST FORM			
<b>SUBJECT'S RIGHT REQUEST</b>						

(1) "Anyone who intentionally declares incorrect facts or denies or conceals the truth by means of a written responsible statement in accordance with Article 8 shall be punished with a custodial sentence of at least three months. If the offender intended to claim a pecuniary advantage for himself or another person or to harm another person by harming a third party, he/she shall be punished with imprisonment of up to ten years.

According to the General Data Protection (EE) 2016/679 (GDPR), as it came into force on 25 May 2018, the data subject has the right to exercise specific rights regarding the processing of personal data. For this procedure the individual must complete this form and send it to the email dpo@isa.edu.gr.

#### A. DETAILS OF DATA SUBJECT (CONCERNED PERSON)

FIRST NAME	<input type="text"/>
SURNAME	<input type="text"/>
DATE OF BIRTH	<input type="text"/>
ADDRESS	<input type="text"/>
REGION	<input type="text"/>
POSTAL CODE	<input type="text"/>
MOBILE PHONE	<input type="text"/>
PHONE NUMBER	<input type="text"/>
EMAIL	<input type="text"/>

#### B. CONFIRMATION OF THE APPLICANT

Once you make a request, and for the purpose of confirming your identity in order to send you the requested information, we will require some information from you in order to confirm that you or someone authorized by you is the intended recipient.

If you would like any assistance with your submission, please contact the Company sending your question at the address provided: Data Protection Officer, J.S.A. THE INTERNATIONAL SCHOOL OF ATHENS LIMITED, Xenias and Artemidos P.O. Box 51051, 145 10 Kifissia, Greece or by mail to (dpo@isa.edu.gr) to give you further instructions .

#### C. REQUESTED INFORMATION

C.1 CONFIRMATION THAT THE COMPANY KEEPS AND PROCESSES MY PERSONAL DATA	<input type="checkbox"/>
C.2 RECEIPT A COPY OF MY PERSONAL DATA	<input type="checkbox"/>
C.3 RECEIPT OF SUPPLEMENTARY MATERIAL TO:	<input type="checkbox"/>
C.3.1. THE PURPOSE/S OF THE PROCESSING OF MY PERSONAL DATA	<input type="checkbox"/>
C.3.2. THE DATA CATEGORIES THAT THE COMPANY PROCESSES	<input type="checkbox"/>
C.3.3. THE DATA RECIPIENTS	<input type="checkbox"/>
C.3.4. THE RETENTION PERIOD OF PERSONAL DATA	<input type="checkbox"/>
C.3.5. INFORMATION ABOUT THE EXTRACTION OF MY PERSONAL DATA FROM SOURCES OUTSIDE THE COMPANY	<input type="checkbox"/>
C.3.6. INFORMATION ABOUT AUTOMATED PROCESS OF MY PERSONAL DATA AND THE IMPACT ON ME	<input type="checkbox"/>
C.3.7. IF MY PERSONAL DATA IS TRANSFERRED ABROAD INFORMATION ABOUT SAFEGUARDS	<input type="checkbox"/>
C.4. DELETION OF MY PERSONAL DATA	<input type="checkbox"/>
C.5. RECTIFICATION OF MY PERSONAL DATA	<input type="checkbox"/>
C.6. RESTRICTION OF PROCESSING OF PERSONAL DATA	<input type="checkbox"/>
C.7. DATA PORTABILITY	<input type="checkbox"/>
C.8. RIGHT TO OBJECTION TO THE PROCESSING OF MY PERSONAL DATA	<input type="checkbox"/>
C.9. SOMETHING ELSE RELATED TO MY PERSONAL DATA Describe below	<input type="checkbox"/>

#### D. RESPOND TO MY REQUEST

At my sole risk and in full knowledge of the sanctions (1) provided by the provisions of par. 6 of Article 22 of Law 1599/1986, I certify that the information I have provided in this form is correct and that I am the person concerned whose name appears on this form.

I understand and fully accept that the Company will need to confirm my identity and may need to contact me again for further information so that the Company can determine the personal information I have requested to receive information about.

I accept that my request will only be valid when the Company has all the required information and I understand that although my request is free, I may be charged some reasonable procedural costs by the Company if I request the same information again or make unfounded or excessive requests.

The applicant

Date: .....20.....  
(Signature)

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