	Data Sul	oject Rights Request Form				
According to Personal Data Protection Act B.E. 2562 (2019), a data subject is entitled to exercise the rights on his/her personal data that For Khonthai Foundation ("the Foundation") may hold. The information required on this form is necessary to fulfill your request. If the data subject wishes to exercise the data subject rights, please fill in all information required in this form and proceed as instructed by the Foundation. Notification (You should ensure that you read and understand the notification before completing this form) 1.Please provide clear and complete details of the personal data that you wish to exercise your rights for the Foundation's consideration and/or effective fulfillment of your request. The Foundation will fulfill your request or notify the result of consideration of your request within 30 days from the date the Foundation receives the completed form, or within the period specified by law, or within other reasonable period of time. 2. The Foundation reserves the right to inquire or request for additional documents e.g. copy of identification card or copy of passport in order to verify your identity in exercising the rights. 3. You hereby consent for the Foundation to collect, use or disclose personal data you have provided in this form for the purpose of considering and/or fulfilling of your request. 4. The Foundation will notify the result of consideration of your request via email, phone message, postal letter or other channels according to the contact information you provided.						
Part 1. Details of Data Subject						
Name-Surname: ID card /Passport number:						
Contact number:	E-mail:					
Contact address						
House No.:Building/Village:	Villa	age No.(Moo): Alley/Lane(So	i):Road:			
Sub-district: Dis	trict:	Province:	Postal Code:			
Part 2. Details of guardian of the Da	ta Subject					
Relationship with the data subject	/curator : Con Con	tact number:				
Part 3. Detail of Request						
Relationship between the Data Subject and the Foundation Donor Donee Guadian/Parent School personnel Network partners or Network partners' personnel Volunteer Participant Current employee Former employee Job applicant Service provider Visitor Others (please specify)						
Part 4. The Right(s) requested by th	-					
Remark : Please indicate which right(s) : List of the Rights	Details of Personal Data you wish to exercise the rights (e.g. address, contact	g '√' in the appropriate box or box Purpose of the processing of Personal Data you wish to exercise the rights for which the Foundation previously asked for your consent or notified you	tes and fill in the relevant details below Details of Exercising Rights			
1.Withdrawal of consent			Please specify reason(s):			
2.1Access to Personal Data 2.2Obtaining a copy of Personal Data 2.3Disclosure of the acquisition of Personal Data			Channel to access/obtain a copy of Personal Data () Send to the Data Subject by e-mail as specified in Part 1 () Send to the Data Subject by post as specified in Part 1 () In person			
3.Rectification of Personal Data			From (Please specify) : Change to (Please specify) :			
 4.1Erasure of Personal Data 4.2Destruction of Personal Data 4.3Anonymization of Personal Data 5.1Data portability to other personal data controllers 			Ground for the request () no longer necessary to retain such Personal Data for the purposes of collection () data processing consent being withdrawn () data processing being objected () Unlawful data processing Transfer to (Please specify name/details of other personal data controllers):			
5.20btaining of Personal Data 5.30btaining of Personal Data sent or transferred to other personal data controllers			Channel to obtan a copy of Personal Data (only 5.2-5.3) () Send to the Data Subject by post as specified in Part 1 () Send to the Data Subject by e-mail as specified in Part 1 () In person			

Image: exercise the rights for which the mumber, name-summe etc.	List of the Rights	Details of Personal Data you wish to exercise the rights	Purpose of the processing of Personal Data you wish to	Details of Exercising Rights		
Image: specific constraints of the personal Data Image: specific constraints of the personal Data C. Adjection to the Personal Data C. If the personal constraints of the personal Data Constraints						
Conjection to the Personal Data Constraint of the Personal Data Constraint of the Personal Data Constraint of the sec of Personal Data Constraint of Personal Data Constraint of the sec of Personal Data Constraint of		number, name-surname etc.)				
pirocessing [] For performing task caried out for the public interest or exercising of official automoty vector in the provide interest of the parameters of the foundation Cound for the request [] 7.Restriction of the use of Personal Data [] Section (automotion is commutation process to excitly the provide interest of the parameters of such colored is a subject to the conception but the data subject neuroperson of the request (_] proceeding the request is an automotion but the data subject request is an automotion but the data subject neuroperson of the request is an automotion of the above request e.g., document manefold Additional Details of Exercising Rights (iff any) Remark : Please provide any additional Information of the above request e.g., document manefold I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods ary products (as the case may be) or others from the Foundation in some parts. I further admonwidage that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods ary products (as the case may be) or others from the Foundation in some parts. I further admonwidage that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods ary products (as the case may be) or others from the Foundation in some parts. I further admonwidage that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods ary products (as the case may be) or others from the Foundation and any other documents service touther formation in some pareceiving services			your consent or notified you			
in the public interfect or correcting and official attrictly vestical in the Possibility flattatic research () production Image: control find attrictly vestical production in the request () production interfect of the use of Personal Data Image: control find attrictly vestical production Image: control find attrictly vestical production interfect of the use of Personal Data Image: control find attrictly vestical production Image: control find attrictly vestical production of the use of Personal Data of the institution of vestical production by the data sequested () product on the the data subject in recessive production by the data subject increases to rectify the Personal Data which should be ensed or destroyed, but the data subject increases the restriction of the use of such the data subject increases the restriction of the use of such the data subject increases the restriction of the use of such the data subject increases the restriction of the use of such the data subject increases the restriction of the use of such the data subject increases the restriction of the use of such the data subject increases the restriction of the exercise subject increases the rights and other details in the box below for the Foundation to property process your request 1 have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various affers of goods or products (as the case may be) or others from the Foundation in some parts. Intrust acknowledge that my request to exercise such rights is subject to the scope and consolidation of the Personal Data Protection on the AE s. 250; (2019) and other relevant laws. Thereby constrained subject: 1 have read, understood and accepted that my request to ex						
Improved and in the use of Personal Data Improved and for the use of Personal Data Improved and for the use of Personal Data Improved and the use of Personal Data Improved and for the use of Personal Data Improved and for the use of Personal Data Improved and the use of Personal Data Improved and for the use of Personal Data Improved and for the use of Personal Data Improved and the use of Personal Data Improved and the use of the executed improves the regulated improved improved improved the use of such regulated improves the regulated improves the regulated improvement of the use of such regulated improves the regulated improvement of the use of such regulated improvement of the use of the second and accepted that my regulate the exercise such rights may prevent me from using, receiving services, receiving information, receiving various of the regulated improvement of the use of the Science of the use of use of such regulated improvement of the use of such regul	processing					
() For selectific/statistic research () For selections of the second () For selections of the fear of the request. () pending the request. () pending the request of the fear of the request. () pending the request of the fear of the request of the fear of the request of the fear of the request of the requ						
Providation Ground for the request Providation Ground for the request Providation Ground for the request Providation Providation Providation						
Participation of the use of Personal Data Ground for the request () pending the Foundation's examination process to rectify the Personal Data are request () pending the Foundation's examination process to rectify the Personal Data are request () pending the Foundation's examination process to rectify the Personal Data are request () in personal Data are the requested () pending the Foundation's examination or verification process with equest bit the exact analytic and the extension of the use of schemestary to the use of schemestary verification of the above requests to extension of the use of schemestary verification of the use of personal Data Information of the abover request e.g. document anae/source of personal Data indication to properly process your request 1 have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving verifies of goads or products (as the case may be) or others for dents of the adover request e.g. document verifies of goads or products (as the case may be) or others verifies of goads or products (as the case may be) or others verifies of goads or products verifies of Data Subject: I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information , receiving verifies of goads or products (as the case may be) or others verifies of goads or products verifies of goads or products verifies of using the davent the						
Percent Disa requested Percent Disa requested (1) profing the Foundations examination or verification process with extension of the input to black for the bit exercising of the right to object his necessity to transact to their subject his necessity of the input to black for the bit may be for data request for data request to the used subject his necessity of the input to black for the used subject his necessity of the input end of	7.Restriction of the use of Personal Data		Foundation	Ground for the request		
() pending the Foundation's examination or verification as requested () pending necessary to retain such Personal Data for the purposes of the objection but the data subject has necessity by the for data prevent of the objection of the use of such personal Data instand (Rease specify) : Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request e.g. document name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the data subject (as the case may be) or others from the Foundation in some parts. If further acknowledge that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. If further acknowledge that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. If further acknowledge that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. If further acknowledge that my request to exercise such rights using the relevant laws. I hereby certify that the information is the and correct in all supporting documents for identity verification and any other documents sent to the Foundation is the end correct in all supported in this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.c.th For Staff Members of the Foundation necesing the Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.c.th For Staff Members of the Foundation						
Inversion Inversion Inversion Inversion Inversion Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request of data relations Inversion Inversion Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request of additional information is properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation is nome parts. In their advonded that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Add B.2.252 (2019) and other devertises. Intermediation is true and correct in all Signature of Data Subject / Representative of Data Subject: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation neaving the Request:						
() The Personal Data for the purposes of such Collicion but the data subject his necessity to request for data retention () The Personal Data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed, but the data which should be erased or destroyed. The should be erased or destroyed be erased and encode should be erased or destroyed. The should be erased or destroyed be erased by the should be erased or destroyed. The should be erased or destroyed be the should be erased or destroyed be erased by the should be erased or destroyed be erased by the should be erased or destroyed be erased by the should be erased or destroyed be erased by the should be erased or destroyed be erased by the should be erased or destroyed by the should be erased or destroyed by the						
Interpretation Interpretation Interpretation Interpretation Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request e.g., document name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the box below for the Foundation to properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information 1 have provided in this from including supporting documents for identity verification and any other documents sent to the Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPQ. KT@kkt.premier.co.th For Staff Members of the Foundation receiving the Request: Approve to proceed with the request Please specify the reason: Approve to proceed with the request: Approve to proceed with the request: Approve to proceed with the request: Name of staff notifying the status of Request to Data Subject; Notification Date: Name of staff notifying the status of Request to Data Subject; Notification Date: <td></td> <td></td> <td></td> <td>-</td>				-		
Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request the restriction of the use of such Personal Data instead (Please specify) : Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request e.g. document name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the box below for the Foundation to properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving viriaus offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2552 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject (Representative of Data Subject:						
Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request e.g. document name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the box below for the Foundation to properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods on products (as the case may be) or others from the Foundation in some parts. If urther acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Forection At R1 E. 2562 (2019) and other relevant laws. In Here's perify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject //Representative of Data Subject: Date of Request: I you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@Mt premier.co.th For Staff Members of the Foundation neceiving the Request:				-		
Additional Details of Exercising Rights (if any) Remark : Please provide any additional information of the above request e.g. document name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the box below for the Foundation to properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act E. 2. 2552 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject //Representative of Data Subject:						
name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the box below for the Foundation to properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject /Representative of Data Subject: Date of Request:						
the box below for the Foundation to properly process your request I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject /Representative of Data Subject:						
I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I herepy vertify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject /Representative of Data Subject: Date of Request: Date of Request: Date of Request: Date of Request: Por Staff Members of the Foundation Only Request form No. (DSAR#): Date of Receipt of Request: Note of proceed with the request Date of Receipt of Request: Note of proceed with the request Note of proceed with the request Approval/Disapprove the request: Approval/Disapprovel Date: Name of staff notifying the status of Request to Data Subject: Notification Date: Notific	-			bu wish to exercise the rights and other details in		
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Approve to proceed with the request Approve to proceed with the request Please specify the reason:Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject:						
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Approve to proceed with the request Approve to proceed with the request Please specify the reason:Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject:						
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Approve to proceed with the request Approve to proceed with the request Please specify the reason:Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject:						
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Approve to proceed with the request Approve to proceed with the request Please specify the reason:Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject:						
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Approve to proceed with the request Approve to proceed with the request Please specify the reason:Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject:						
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request:						
various offers of goods or products (as the case may be) or others from the Foundation in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all Signature of Data Subject / Representative of Data Subject: Date of Request: Date of Request:						
rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all signature of Data Subject /Representative of Data Subject: Date of Request: Date of Request: If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Request:						
Signature of Data Subject /Representative of Data Subject:			•			
If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Name of Staff of the Foundation receiving the Request: Approve to proceed with the request Disapprove/Reject the request Please specify the reason: Name of authorised person to approve/disapprove the request: Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject; the Foundation rejects to proceed as requested by Data Subject, the Foundation has recorded its rejection together with supporting reasons in	have provided in this form including supporting documents for identity verification and any other documents sent to the Foundation is true and correct in all					
If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th For Staff Members of the Foundation Only Request Form No. (DSAR#): Date of Receipt of Request: Name of Staff of the Foundation receiving the Request: Approve to proceed with the request Disapprove/Reject the request Please specify the reason: Name of authorised person to approve/disapprove the request: Approval/Disapproval Date: Name of staff notifying the status of Request to Data Subject: Execution Date: Name of staff notifying the status of Request to Data Subject; the Foundation rejects to proceed as requested by Data Subject, the Foundation has recorded its rejection together with supporting reasons in						
For Staff Members of the Foundation Only Request Form No. (DSAR#):	Signature of Data Subject /Representative of Data Subject: Date of Request:					
Request Form No. (DSAR#):	If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_KTF@ktf.premier.co.th					
Name of Staff of the Foundation receiving the Request:	For Staff Members of the Foundation Only					
Name of Staff of the Foundation receiving the Request:	Poquet Form No. (DSAR#):	ח	ate of Possipt of Posuest			
Approve to proceed with the request Disapprove/Reject the request Please specify the reason:						
Disapprove/Reject the request Please specify the reason:	Name of Staff of the Foundation receiving the Request:					
Please specify the reason:	Approve to proceed with the request					
Name of authorised person to approve/disapprove the request:	Disapprove/Reject the request					
Name of authorised person to approve/disapprove the request:						
Name of executing staff: Execution Date:Notification DATE:NOTIF	Please specify the reason:					
Name of executing staff: Execution Date:Notification DATE:NOTIF						
Name of staff notifying the status of Request to Data Subject:	Name of authorised person to approve/disapp	rove the request:	ΔΑ	pproval/Disapproval Date:		
Name of staff notifying the status of Request to Data Subject:						
In case that the Foundation rejects to proceed as requested by Data Subject, the Foundation has recorded its rejection together with supporting reasons in	Name of executing staff:		Execution Date:			
the Foundation has recorded its rejection together with supporting reasons in	Name of staff notifying the status of Request	to Data Subject:	No	btification Date:		
	In case that the Foundation rejects to proceed as requested by Data Subject, the Foundation has recorded its rejection together with supporting reasons in					
			Record Date:	Recorder:		