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| **PERSONAL DATA REQUEST FORM** | | | |
| Using this form, any natural person may exercise his/her rights under the General Data Protection Regulation (GDPR) and Greek legislation (Law 4624/2019) in respect of his/her personal data processed by the Bank.  As data controller, the Bank, pursuant to the applicable legislation, is committed to evaluating your request and shall give a positive answer when this is permitted by the legal framework.  Please fill out all the fields below carefully to ensure optimal handling of your request: | | | |
| **Personal details of the natural person exercising his/her rights** | | | |
| First name: | Click here to enter text. | Date of birth: | Click here to enter text. |
| Surname: | Click here to enter text. | Telephone number: | Click here to enter text. |
| Address: | Click here to enter text. | E-mail: | Click here to enter text. |
| **Right** **exercised** *(Type of right you wish to exercise):* | | | |
| Access to my personal data  Rectification of inaccurate/completion of incomplete personal data concerning me  Erasure of my personal data  Restriction of processing of my personal data  Portability of my personal data  Objection to processing of my personal data  Withdrawal of consent to processing of my personal data  Please describe your request in more detail in the field below: | | | |
| Click here to enter text. | | | |
| **Indicate how would like us to contact you in connection with your request** | | | |
| by e-mail  By postal mail | | | |
| **Proof of identity**  The Bank requires proof of your identity before fulfilling your request. In order to prove your identity to us, please attach a copy of one of the following documents to this request:  Identity card  Driving licence  Passport  Other official document showing your name and, if possible, address. | | | |
| **Declaration**  I, Click here to enter text., hereby declare that I have read and accepted the conditions of this request and confirm that the information provided herein is accurate. I understand that the Bank has the right to check my details and to request further information for identification purposes.  **Full** **name**: Click here to enter text. **Date**: Click here to enter text. | | | |
| **Submission of form**  Please send this form and a copy of one of the documents referred to in the “Proof of Identity” section by email to [dpo@bankofgreece.gr](mailto:dpo@bankofgreece.gr) or by postal mail to the following address: BANK OF GREECE, 21, E. Venizelou St., ATHENS 10250 (To the attention of the Data Protection Officer). | | | |