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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 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). |