

## DATA ENTITLEMENT SUBMISSION FORM UNDER THE GENERAL DATA PROTECTION REGULATION ((EU) 2016/679)

A.	API	PLICANT'S DETAILS			
Full Name:					
Passport/ID Number:					
В.	3. TYPE OF REQUEST (tick √ to the appropriate box and fill in, as appropriate and where required, the necessary information in order to assess your request.)				
1.	Rig	ht to be Informed <sup>1</sup>			
		Information regarding the:			
		☐ The types of personal data which the Bank collects and processes.			
		☐ The purposes of the process of my personal data by the Bank.			
		The external associates to whom the Bank discloses my personal data.			
		Other:			
2.	Rig	ht of Access			
		Preparation of a file with my personal data maintained by the Bank and forwarding as such to:			
		☐ My last known mailing address, which is maintained in the Bank's records.			
		☐ The following e-mail address/es, which is/are maintained in the Bank's records:			
	Dia	ht of Dowtobility			
3.		ht of Portability			
	Ш	Transmission in electronic format of my personal data to:			
		☐ The following e-mail address/es, which is/are maintained in the Bank's records:			
		☐ The following e-mail address of the entity:			
		☐ The following licensed credit institution, operating in the Republic of Cyprus:			
4.	Rev	vocation of Consent¹			
		Revocation of consent for the provision of updates and/or notifications regarding the marketing of products and/or services of the Bank.			
5.	Rig	Right of Rectification <sup>1</sup>			
		Correction of my below personal data and/or completion of the below incomplete data as follows:			
6.	Ria	ht of Restriction <sup>1</sup>			
<u> </u>		Restriction of processing of my below personal data for the following reason/s:			
		1			
7.	Rig	ht of Objection <sup>1</sup>			
		Objection to the processing of my below personal data for the following reason/s:			

E 12.1 E 1/3 Initial: \_\_\_\_\_

 $<sup>^{\</sup>rm 1}$  In section D please select how the Bank will communicate with you, following the receipt of the request.



## Cyprus

		Objection to my profiling for the provision of targeted information regarding the Bank's events.		
8.	Right of Objection to the automated decision making <sup>1</sup>			
		Objection to the Bank's decision based entirely on automated processing (i.e. AML monitoring and scoring).		
9.	Rig	ht to be Forgotten <sup>1</sup>		
		Deletion of my below personal data for the following reason/s:		
C.	AD	DITIONAL INFORMATION		
Add	lany	other information that may be relevant to your request.		
D.		THOD OF COMMUNICATION		
		k √ <i>to the appropriate box)</i> To my last known mailing address, which is maintained in the Bank's records.		
	_	To the following e-mail address/es, which is/are maintained in the Bank's records:		
		To the following of mail address/ess, which is/are maintained in the Bank's records.		
E.	GE	NERAL		
	1. The Bank will assess your request on the basis of the General Data Protection Regulation (EU 2016/679), the applicable law and its Privacy Statement and will respond in writing, within thirty (30) days from the date of receipt of the request.			
	addre	Bank may, when assessing your request, request additional documents and proof of identity or passport and/or ess in order to confirm your identity. The Bank also reserves the right to request the submission of additional bank is based on its internal procedures.		
3.	comp	thirty (30) day period may be extended by a further two (2) months, if required, taking into consideration the blexity of the request and the number of requests. In such a case, the Bank will inform you of this extension, within one onth of receipt of the request, whilst indicating also the reasons for the delay.		
4.	mani	information provided to you on the basis of your request, are free of charge. It is noted that if your request is festly unfounded or excessive or repetitive, then the Bank may impose a reasonable fee or refuse to comply with your est, in accordance with the provisions of the General Data Protection Regulation (EU 2016/679) and the applicable		
5.		Bank does not act on your request, it will inform you accordingly without delay, within one (1) month of receipt of the est the latest, for the reasons it has not acted.		
F.	DE	CLARATION		
I hereby declare that I have read and understood the terms of this form and that I have carefully read and understood the contents of the Privacy Statement regarding the processing of my personal data and my related rights. I understand that the above mentioned form is also available at the Bank's banking centers and on the Bank's website at <a href="https://www.eurobank.com.cy">www.eurobank.com.cy</a> .				
I also confirm that the information stated in the form are true and correct and I understand that for the assessment of my request, it is necessary that the Bank confirms my identity and, where necessary, requests further information on the request.				
Sig	Signature Date			

E 12.1 E 2/3 Initial: \_\_\_\_\_



FOR INTERNAL USE				
Date of receipt of request:				
Signature confirmation (full name and signature):	Date:			
Approval of request- Manager of the Responsible Banking Center (full name and signature):	Date:			

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