

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

| A. APPLICANT'S DETAILS   |   |
|--|---|
| Full Name:   |   |
| Passport/ID Number:  |   |
| B. TYPE OF REQUEST<br>(tick ✓ to the appropriate box and fill in, as appropriate and where required, the necessary information in order to assess your request.) |   |
| <b>1.</b>  | <b>Right to be Informed<sup>1</sup></b>   |
|  | <input type="checkbox"/> Information regarding the:   |
|  | <input type="checkbox"/> The types of personal data which the Bank collects and processes.  |
|  | <input type="checkbox"/> The purposes of the process of my personal data by the Bank.   |
|  | <input type="checkbox"/> The external associates to whom the Bank discloses my personal data.   |
|  | <input type="checkbox"/> Other: .....<br>.....  |
| <b>2.</b>  | <b>Right of Access</b>  |
|  | <input type="checkbox"/> Preparation of a file with my personal data maintained by the Bank and forwarding as such to:  |
|  | <input type="checkbox"/> My last known mailing address, which is maintained in the Bank's records.  |
|  | <input type="checkbox"/> The following e-mail address/es, which is/are maintained in the Bank's records:<br>.....   |
| <b>3.</b>  | <b>Right of Portability</b>   |
|  | <input type="checkbox"/> Transmission in electronic format of my personal data to:  |
|  | <input type="checkbox"/> The following e-mail address/es, which is/are maintained in the Bank's records:<br>.....   |
|  | <input type="checkbox"/> The following e-mail address of the entity .....:  |
|  | .....   |
|  | <input type="checkbox"/> The following licensed credit institution, operating in the Republic of Cyprus:  |
|  | .....   |
| <b>4.</b>  | <b>Revocation of Consent<sup>1</sup></b>  |
|  | <input type="checkbox"/> Revocation of consent for the provision of updates and/or notifications regarding the marketing of products and/or services of the Bank. |
| <b>5.</b>  | <b>Right of Rectification<sup>1</sup></b>   |
|  | <input type="checkbox"/> Correction of my below personal data and/or completion of the below incomplete data as follows:  |
|  | <div style="border: 1px solid black; height: 30px; width: 100%;"></div>   |
| <b>6.</b>  | <b>Right of Restriction<sup>1</sup></b>   |
|  | <input type="checkbox"/> Restriction of processing of my below personal data for the following reason/s:  |
|  | <div style="border: 1px solid black; height: 30px; width: 100%;"></div>   |
| <b>7.</b>  | <b>Right of Objection<sup>1</sup></b>   |
|  | <input type="checkbox"/> Objection to the processing of my below personal data for the following reason/s:  |
|  | <div style="border: 1px solid black; height: 30px; width: 100%;"></div>   |

<sup>1</sup> In section D please select how the Bank will communicate with you, following the receipt of the request.

|  |                          |  |
|--|--------------------------|--|
|  | <input type="checkbox"/> | Objection to my profiling for the provision of targeted information regarding the Bank's events.           |
| <b>8. Right of Objection to the automated decision making<sup>1</sup></b>  |                          |  |
|  | <input type="checkbox"/> | Objection to the Bank's decision based entirely on automated processing (i.e. AML monitoring and scoring). |
| <b>9. Right to be Forgotten<sup>1</sup></b>  |                          |  |
|  | <input type="checkbox"/> | Deletion of my below personal data for the following reason/s:   |
|  |                          |  |
| <b>C. ADDITIONAL INFORMATION</b>   |                          |  |
| Add any other information that may be relevant to your request.  |                          |  |
|  |                          |  |
| <b>D. METHOD OF COMMUNICATION<br/>(tick ✓ to the appropriate box)</b>  |                          |  |
|  | <input type="checkbox"/> | To my last known mailing address, which is maintained in the Bank's records.                               |
|  | <input type="checkbox"/> | To the following e-mail address/es, which is/are maintained in the Bank's records:                         |
|  |                          |  |
| <b>E. GENERAL</b>  |                          |  |
| <p>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.</p> <p>2. The Bank may, when assessing your request, request additional documents and proof of identity or passport and/or address in order to confirm your identity. The Bank also reserves the right to request the submission of additional bank forms based on its internal procedures.</p> <p>3. The thirty (30) day period may be extended by a further two (2) months, if required, taking into consideration the complexity of the request and the number of requests. In such a case, the Bank will inform you of this extension, within one (1) month of receipt of the request, whilst indicating also the reasons for the delay.</p> <p>4. The information provided to you on the basis of your request, are free of charge. It is noted that if your request is manifestly unfounded or excessive or repetitive, then the Bank may impose a reasonable fee or refuse to comply with your request, in accordance with the provisions of the General Data Protection Regulation (EU 2016/679) and the applicable law.</p> <p>5. If the Bank does not act on your request, it will inform you accordingly without delay, within one (1) month of receipt of the request the latest, for the reasons it has not acted.</p> |                          |  |
| <b>F. DECLARATION</b>  |                          |  |
| <p>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="http://www.eurobank.cy">www.eurobank.cy</a>.</p> <p>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.</p>  |                          |  |
|  |                          | <p>.....</p> <p><b>Date</b></p>  |
|  |                          | <p>.....</p> <p><b>Signature</b></p>   |

|   |              |
|---|--------------|
| <b>FOR INTERNAL USE</b>   |              |
| <b>Date of receipt of request:</b>  |              |
| <b>Signature confirmation</b> <i>(full name and signature):</i>   | <b>Date:</b> |
| <b>Approval of request– Manager of the Responsible Banking Center</b> <i>(full name and signature):</i> | <b>Date:</b> |