

Data Subject Request (DSR) Form

This form should be used to submit a data subject request under the provisions of the European Union General Data Protection Regulation (GDPR).

The personal data required by this form is necessary to enable the European Cancer Patient Coalition of ('ECPC') to process your Data Subject Action Request. The information you supply will only be used for the purposes of identifying the personal data you are requesting and for responding to your request, in accordance with the GDPR. It may be shared with our legal and administrative teams and it will be stored securely until the relevant procedures are completed.

1. Details of the person requesting the information:

Full Name:	Former Names (if applicable):
Current Address:	Former Address (including dates of change) (if applicable):
Date of Birth:	E-mail address (optional):
Contact Phone Number:	

2. Are you the Data Subject? (check box that applies)

☐ I am the Data Subject and enclose evidence of my identity and address.

☐ I am not the Data Subject, but am acting on the Data Subject's behalf as his/her personal representative. I have written authority, which I enclose, along with evidence of my identity and address.

To ensure that we are releasing data to the right person, please provide us with sufficient identification, in accordance with applicable law, to confirm that you are entitled to the information requested under the GDPR.

The nature of the identification required will depend on the nature of your request and your relationship with ECPC. For example, if you are an ECPC employee, please provide your employee number or other work-related information that can be used to identify you. If you are related to a member of ECPC, or a third party with no affiliation with ECPC, please provide at least two forms of identification sufficient to authenticate your identity and physical address.

Any identification documents sent to us should be transmitted through secure means of communication and should be photocopies or scanned images (do not send the originals).

If you do not provide adequate proof of identity, we reserve the right to decline to provide the requested personal data.

3. Details of the Data Subject (if different than No.1 you are not the Data Subject)

Full Name:	Former Names (if applicable):
Current Address:	Former Address (including dates of change) (if applicable):
Date of Birth:	E-mail address (optional):
Contact Phone Number:	

4. Identify what right(s) you are pursuing and, in the space provided below, describe the specific information/action you are requesting.

Please provide as much detail as possible, such as relevant dates, references, etc.

Please select the type of request you are making:

- ☐ ***Consent Withdrawal***
- ☐ ***Access request***
- ☐ ***Rectification of personal data***
- ☐ ***Erasure of personal data***
- ☐ ***Restriction of processing of personal data***
- ☐ ***Personal data portability request***
- ☐ ***Objection to processing of personal data***
- ☐ ***Request regarding automated decision making and profiling***

Personal data involved**Request details****Request reason/justification**

Please note that if you are making a Data Subject Action Request and the information you request reveals details directly or indirectly about another person, we will need to seek the consent of that person before we can disclose that information to you. In certain circumstances, where disclosure of part or all of the information you have requested would adversely affect the rights and freedoms of others, we may not be able to disclose the information to you, in which case you will be informed promptly and given full reasons for that decision. Please further note that information covered by a legal professional privilege or obligation cannot be disclosed.

Other types of Data Subject Action Requests are subject to certain conditions and exceptions. We will advise you in writing if we believe that your Data Subject Action Request fails to meet the requirements of the GDPR in whole or in part.

In most circumstances, ECPC will provide you with a copy of the information requested free of charge. However, ECPC may be permitted to charge a reasonable fee if a Data Subject Action Request is repetitive or manifestly unfounded or excessive. ECPC also may charge a reasonable fee to comply with Data Subject Action Requests for further copies of the same information. The fee will be based on the administrative cost of providing the information.

5. . Previous Data Subject Action Requests (if applicable)

Please note – This section only applies if ECPC has made a previous Data Subject Action Request (DSAR) disclosure for you.

Date of previous DSAR:	
Reference number of previous DSAR:	
Name previous DSAR was made under:	

6. Declaration

I declare that the information given here-above are correct to the best of my knowledge, and that I am entitled to make the request identified above under the terms of the GDPR.

Signature:	
Name:	
Date of request	

Once completed, this form should be submitted via email to privacy@ecpc.org or posted to: **European Cancer Patient Coalition (ECPC)**
Rue Montoyer, 49
1000 Bruxelles
Belgium

If your request is valid, we will acknowledge your request in writing and provide you with a reference number relating to your Data Subject Action Request and start processing your records.

If your request is valid but we are unable to identify you, we will advise you of this and request additional information.