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**Data Subject Data Portability Request Form**

Article 20 of the EU General Data Protection Regulation (Regulation (EU) 2016/679) (GDPR) grants you the right to receive a copy of certain personal data held by Medochemie Limited (hereinafter referred to as “**Medochemie**”), and the right to transfer that personal data to another organization (data controller). We require that you submit this request electronically via email to dpo@medochemie.com.

We expect to respond to your request within one month of receipt of a fully completed form and proof of identity.

For more information on your rights under the GDPR, please see Medochemie’s Data Subject Rights Policy and Privacy & Cookies Policy available at: www.medochemie.com.

I. **Requester Name (Data Subject) and Contact Information**

**Please provide the data subject’s information in the space provided below. If you are making this request on the data subject’s behalf, you should provide your name and contact information in Section III.**

We will only use the information you provide on this form to identify you and the personal data relevant to your data portability request, and to respond to your request.

|  |  |
| --- | --- |
| **First and last name:** |  |
| **Any other names that you have been known by (including nicknames):** |  |
| **Home address:** |  |
| **Date of birth:** |  |
| **Telephone number:** |  |
| **Email address:** |  |
| **If you are a current or former employee of Medochemie, please provide your employee identification number and your approximate dates of employment:** |  |
| **Please provide other unique identifiers or related information to help us locate your personal data (for example, government identification number or customer account number):** |  |

II. **Proof of Identity**

We require proof of your identity before we can respond to your data portability request. To help us establish your identity, you must provide two pieces of identification that clearly show [your name, date of birth, and current address. We accept a photocopy or a scanned image of one of the following as proof of identity: passport or national identification number card. If you have changed your name, please provide the relevant documents evidencing the change.

If you do not have any of these forms of identification available, please contact Ms. Giota Andreou at 25 852609 or dpo@medochemie.com for advice on other acceptable forms of identification.

We may request additional information from you to help confirm your identity and your right to data portability, and to provide you with the personal data relevant to your request.

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III. **Requests Made on a Data Subject’s Behalf**

Please complete this section of the form with your name and contact details if you are acting on the data subject’s behalf.

|  |  |
| --- | --- |
| **First and last name:** |  |
| **Home address:** |  |
| **Date of birth:** |  |
| **Telephone number:** |  |
| **Email address:** |  |

We accept a photocopy or a scanned image of one of the following as proof of your identity: passport or national identification number card. If you do not have any of these forms of identification available, please contact Ms. Giota Andreou at 25 852609 or dpo@medochemie.com for advice on other acceptable forms of identification. We may request additional information from you to help confirm your identity if necessary.

We also require proof of the data subject’s identity before we can respond to the request. To help us establish the data subject’s identity, you must provide identification that clearly shows the data subject’s name, date of birth, and current address. We accept a photocopy or a scanned image of one of the following as proof of identity: passport or photo identification such as national identification number card. If the data subject has changed his/her name, please provide the relevant documents evidencing the change.

We accept a copy of the following as proof of your legal authority to act on the data subject’s behalf: a written and notarized consent signed by the data subject, a certified copy of a Power of Attorney, or evidence of parental responsibility.

We may request additional information from you to help confirm the data subject’s identity. We reserve the right to refuse to act on your request if we are unable to verify your legal authority to act on the data subject’s behalf.

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IV. **Information Subject to Article 20**

Under Article 20, you have the right to receive a copy of certain personal data that you provided to us, or the right to transmit that personal data to another data controller, if we use automated means to process the personal data and we either:

1. Process the personal data with your consent.
2. Process the personal data because it is necessary for us to perform a contract with you.

Personal data provided by you includes:

1. Information that you knowingly and actively provided to us.
2. Information generated by and collected from your activities while using our services.

Your data portability right does not apply to data inferred or derived by the data provided by you such as data we generate by analyzing your personal data.

In response to your request, we will provide you with a copy of the personal data covered by the Article 20 data portability right in a structured, commonly used, and machine-readable format, or, we will transfer the relevant personal data to another data controller at your request if technically feasible.

If the information you request reveals personal data about a third party, we will either seek that individual’s consent before responding to your request, or we will redact third parties’ personal data before responding, if appropriate. If we are unable to provide you with a copy of your personal data because disclosure would violate the rights and freedoms of third parties, we will notify you of this decision.

Applicable law may allow or require us to refuse to act on your request, or we may have destroyed, erased, or made your personal data anonymous in accordance with our record retention obligations and practices. If we cannot provide you with a copy of or transfer your personal data to another data controller, we will inform you of the reasons why, subject to any legal or regulatory restrictions. If we determine that the personal data you are requesting a copy of is not subject to Article 20, we will inform you of this decision.

We will begin processing your data portability request as soon as we have verified your identity and have all of the information we need to locate your relevant personal data.

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V. **Signature and Acknowledgement**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, confirm that the information provided on this form is correct and that I am the person whose name appears on this form. I understand that: (1) Medochemie Ltd must confirm proof of identity and may need to contact me again for further information; (2) my request will not be valid until Medochemie Ltd receives all of the required information to process the request; and (3) I am entitled to a copy of certain limited personal data that I have provided to you, subject to Article 20, or, I may request that you transfer my personal data to another data controller.

Please indicate below whether you would like us to transfer a copy of your personal data to another data controller and provide the relevant information for the transfer.

Please transfer a copy of my personal data to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by emailing a copy to ………………………. at email address ………………………, or email a CD or other physical media to ………………………….. at …………………………………………………….

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

VI. **Authorized Personal Signature**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, confirm that I am authorized to act on behalf of the data subject. I understand that Medochemie Ltd must confirm my identity and my legal authority to act on the data subject’s behalf, and may need to request additional verifying information.

I understand that: (1) Medochemie Ltd must confirm proof of identity and may need to contact me again for further information; (2) my request will not be valid until Medochemie Ltd receives all of the required information to process the request; and (3) I am entitled to a copy of certain limited personal data that the data subject has provided to you, subject to Article 20, or, I may request that you transfer such personal data to another data controller.

Please indicate below whether you would like us to transfer a copy of the personal data to another data controller and provide the relevant information for the transfer.

Please transfer a copy of the personal data to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by emailing a copy to ………………………. at email address ………………………, or email a CD or other physical media to ………………………….. at …………………………………………………….

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date