

# FORM 2 THE DATA PROTECTION ACT, 2020

## APPLICATION FOR ACCESS TO PERSONAL DATA

Under section 6(2) of the Act.

Reference no: \_\_\_\_\_ (For Internal Use Only)

### ▶ 1. Data Controller: (Please state the name and address of the data controller to whom the application is being directed)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_

### ▶ 2. Name of Data Subject: (Print)

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

### ▶ 3. Name of Applicant: (If acting on behalf of a data subject) (Print)

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

### ▶ 4. Date of birth (of data subject):

(DD/MM/YYYY)

### ▶ 5. Sex (of data subject): Male Female

Address: \_\_\_\_\_

### ▶ 6. Please indicate the address to which correspondence related to your application should be sent

Home: \_\_\_\_\_ Mailing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Other: \_\_\_\_\_

### ▶ 7. I hereby require you: (Please check the relevant box(es))

- be informed whether the personal data of the abovenamed data subject is being processed by you or on your behalf;
- be given a description of the:
- » Personal data of the abovenamed data subject which is being processed.
  - » Purpose(s) for which the data are being, or are to be, processed; and
  - » Recipients or classes of recipients to whom the data are or may be disclosed;
- have the personal data of the abovenamed data subject made available to me and to be advised of the source of the data (if known);
- have the personal data of the abovenamed data subject transmitted to the following data controller(s):
- Name of data controller: \_\_\_\_\_
- Address of data controller: \_\_\_\_\_
- Telephone: \_\_\_\_\_ Email: \_\_\_\_\_
- be informed of the logic involved in the automated decision which was taken regarding the data subject;

### ▶ 8. I would like to have the personal data of the abovenamed data subject made available in the following format:

Photocopy:  Electronically:  Other (please specify): \_\_\_\_\_

**Note:** Payment will be required before the personal data are, or the logic involved in an automated decision is, made available or the personal data are transmitted to another data controller.

Signature of data subject/applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
(DD/MM/YYYY)

**Note:** Please submit any documents/evidence in support of the application.