

Form for Requesting the Exercise of Data Subject Rights

Please send the completed request to the Data Protection Officer at oou@newton.university or to their representative, or you may submit the form in person at the following locations: NEWTON University, a.s., Rašínova 2, Brno or NEWTON University, a.s., 5. května 1640/65, Prague.

Name and Surname:
Address:
Date of Birth:
Phone:
Email:
I hereby request the exercise of my rights under the Regulation (EU) 2016/679 of the
European Parliament and of the Council as follows:
☐ Withdrawal of consent for all / specifically:
☐ Access to personal data – all / processed for the purpose of:
☐ Access to personal data held in paper form - please list them / I request copies of:
□ Right to rectification / supplementation of these data:
☐ Right to erasure of all data / specifically:
☐ Right to restrict processing of all data / these data / for this purpose:
□ Right to data portability of all / specifically:





Please forward this data to the following controller:
□ Right to object to processing:
In the case of personal submission, the identity of the data subject was verified against a valid document:
Type: Number:
Signature of the Data Subject:
Signature of the Authorized Employee:

These personal data will be recorded for 10 years from the request for the purpose of protecting the legitimate interests of NEWTON University, a.s. The data subject may exercise the aforementioned rights at any time with the Data Protection Officer or file a complaint with the Office for Personal Data Protection. You also have the right to object to this processing.

IČ: 270 81 869