



DATA SUBJECT REQUEST FORM

As a Data Subject you have the following rights:

- *Right to be informed.* You have the right to be informed of how your data is collected, used, stored, shared and disposed. We provide this information through our Privacy Notices.
- *Right to object.* You have the right to object to our processing of your personal data when we base the processing on your consent or our legitimate interest. You may also withdraw your consent, once withdrawn we will stop processing your personal data.
- *Right of access.* You have the right to ask us for information on how we use, store, disclose or protect your personal data.
- *Right to rectification.* You have the right to ask us to modify or correct your personal data when the same is inaccurate, outdated or false.
- *Right to erasure or blocking.* You have the right to request us to delete your personal data or request us to stop using your data for specific purpose/s.
- *Right to data portability.* You have the right to ask that we transfer your personal data to another organization, or to you, in certain circumstances.
- *Right to file a complaint and ask for damages.* If you think that your rights as a data subject have been violated, or if you sustained damages due to any inaccurate, incomplete, outdated, false, unlawfully obtained or unauthorized use of your personal data, you may escalate your concern to us so we can assist you.

The personal data collected will only be used to verify your identity and assess your request. The data collected shall be retained for 1 year from termination of your request management. For more information about how we process your personal data, please read our Privacy Notice (<https://almanaf.ph/privacy-notice>).

INSTRUCTIONS:

This form should be submitted together with the following supporting documents to allow us to verify your identity or authority:

1. For the Data Subjects:
 - i. Copy of valid government issued ID
2. For persons requesting for and on behalf of another:
 - i. Authorization letter or Special Power of Attorney (SPA) signed by the data subject,
 - ii. Copy of valid government issued ID of the data subject, and
 - iii. Copy of valid government issued ID of the representative.
3. For the legal heirs and assigns of the data subject invoking the transmissibility of the right of the data subject:
 - i. PSA copy of Death Certificate, Marriage Certificate, and/or Birth Certificate of the data subject,

- ii. PSA copy of Birth Certificate of the legal heirs and assigns, and
 - iii. Copy of valid government issued ID of the legal heirs, assigns or requesting party.
4. For parents or legal guardians on behalf of their minor or incapacitated child:
- i. PSA copy of the Birth Certificate of the child and
 - ii. Copy of valid government issued ID of the parent or legal guardian.
5. For organizations requesting on behalf of its members:
- i. Authorization letter signed by the data subject;
 - ii. Secretary's Certificate, if the organization is a corporation or partnership;
 - iii. Proof of membership of data subject in the organization.



PERSONAL DETAILS	
I am	<input type="checkbox"/> a Data Subject <input type="checkbox"/> Requesting for _____ <div style="text-align: right; font-size: small;"><i>(Name of Data Subject)</i></div>
Name	
Email Address	
REQUEST DETAILS	
Data Subject Right Request <i>(Please check applicable box.)</i>	<input type="checkbox"/> Access <input type="checkbox"/> Rectify <input type="checkbox"/> Erasure <input type="checkbox"/> Copy/Transfer of Data <input type="checkbox"/> Complaint <input type="checkbox"/> Inquiry <input type="checkbox"/> Other: <i>[please describe the nature of your request]</i>
Details of Request <i>(Please explain your request and provide details to help us facilitate your request.)</i>	
Purpose of Request <i>(Please explain the reason for the request.)</i>	
Supporting Documents <i>(Please submit together with this form the supporting documents to help us determine the authenticity of your request. Enumerate here the supporting documents submitted.)</i>	
CONSENT AND DECLARATION	

I confirm that I have read and understood the terms of this “Data Subject Request Form” and declare that all information above are true and correct to the best of my knowledge.

I understand that it is necessary for Al Manaf to confirm my and/or the Data Subject’s identity in order to properly act on this request. I authorize Al Manaf to verify and validate the contents stated herein.

I understand and consent to the use of personal data for the processing of my request.

Signature over printed name

Date

For Internal Use Only

RECEIVED BY:

DPO REMARKS:

DATE RECEIVED:
(DD/MM/YYYY)