



## Data Subject Request Form

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

### Submitter Details

<b>Name:</b>		
<b>Identification data:</b>	ID number:	
<b>Contact details:</b>	Street:	Number:
	Postal Code:	City:
	Country:	
	Email:	
<b>Phone Number:</b>		

### Type of Request

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**

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**Request details**

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**Request reason/justification**

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<b>Signature:</b>	
<b>Name:</b>	
<b>Date:</b>	

You can submit your form in the following ways:

- Online at email: [dpo@acs.gr](mailto:dpo@acs.gr)
- By postal mail to Address: 129 Aghias Paraskevis Ave. & Kazantzaki Street, Halandri, Athens GR 15234
- Personal delivery to ACS