**TEMPLATE PERSONAL DATA ACCESS / CORRECTION REQUEST FORM FOR WEBSITE**

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| **PART A - Your personal details** | | |
| Name |  | |
| NRIC no. |  | |
| Address |  | |
| Contact no. |  | |
| What is the nature of your relationship with TCB? |  | |
| **PART B - Is the personal data to be accessed or corrected about you (are you the data subject)?** | | |
| Yes *(please fill in Parts D to F)*  No *(please fill in Parts C to F)* | | |
| **PART C - Person / agent acting on behalf of the data subject** | | |
| Name | |  |
| NRIC / Passport no.  *\* Please provide a copy of NRIC / passport* | |  |
| Address | |  |
| Contact no. | |  |
| What is your relationship with the data subject (*eg. parent, guardian, legal representative*) | |  |
| If the data subject is under 18 years old, do you have parental responsibility over the data subject? | |  |
| Provide proof that you are authorised to act on behalf of the data subject | | Please email any of the following with this form:   * Evidence of parental responsibility (eg. birth certificate of the data subject) * Letter of authorisation * Others \_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| **PART D - Details of personal data to be accessed or corrected** | | |
| Please indicate whether you wish to: | | * Have access to personal data * Make correction to personal data |
| Please provide:   * in relation to a data access request, a description of the personal data; or * in relation to a data correction request, a description of the personal data and the relevant correction required to be made on the personal data,   and any other relevant information as to the location of the personal data (*eg. describe any departments that you think may be in possession of the personal data*) | |  |
| **PART E - Others** | | |
| Copies of the requested / corrected personal data to be: | | * Provided to the \* data subject / person or agent acting on behalf of the data subject by hand * Sent to the \* data subject / person or agent acting on behalf of the data subject by registered post |
| Hard copies to be provided? | | * Yes * No |
| **PART F - Declaration** | | |
| I certify that the information provided on this form is true.  I understand that Tradewinds Corporation Berhad (“**TCB**”) would require confirmation or proof of identity / authority and that I may be required to provide further information to TCB or any other relevant party in order for TCB to comply with this data access request / data correction request.  Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **For Office Use Only** | | |
| This form is acknowledged and received by [xx].  Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Position : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of receipt : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |