



DATA SUBJECT RIGHTS REQUEST FORM

The Data Protection Act allows for a data subject to exercise their rights on his/ her personal data that BECI may hold. The information required on this form is necessary to enable us to fulfil your request.

Please provide clear and complete details of the personal data you wish to exercise your rights for the company’s consideration. We will respond to your request withing Thirty (30) days from the date of receipt of this completed form, or within the period specified by law.

We reserve the right to enquire or request additional documentation for verification of your identity in exercising the rights.

The result following consideration of your request will be communicated through channels according to the contact information you have provided.

Section A Details of the Data Subject

Names	
Contact number	
ID/Passport number	
Email address	
Correspondence address	

Section B Details of guardian of the Data Subject (In case the data subject is a minor as defined by law)

Names	
Contact number	
ID/Passport number	
Email address	
Correspondence address	
Relationship with the Data Subject	

Relationship between the Data Subject and [INSERT IRGANISATION NAME]

E.g. (Customer, employee, visitor, former employee, other)



a BDC Subsidiary

Directors: K. Molimi (Chairperson), J.L Segotlong, K.Gaobakwe, B. Gaoetswe, O. Muzila

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Section C Data Subject Right Requested (tick applicable)

Rights	Description of request
Access	
Erasure	<p>Ground for request:</p> <p><input type="checkbox"/> no longer necessary to retain for the purpose of collection,</p> <p><input type="checkbox"/> consent has been withdrawn,</p> <p><input type="checkbox"/> unlawful data processing,</p> <p><input type="checkbox"/> objection to processing</p> <p><input type="checkbox"/> Compliance with a legal obligation to erase</p>
Rectification	<p>Correct (specify)</p> <p>.....</p> <p>Complete(specify).....</p> <p>.....</p>
Portability	<p>Transfer to: (please specify names/ details of other personal data controllers.)</p> <p>.....</p> <p>.....</p>

Restriction of processing	(Specify grounds)
Withdraw consent	
Right to object to processing	(Specify grounds)
Human intervention on automated decision	

Preferred mode of feedback to the request:

Date: _____

Signature: _____