**APPLICATION FORM FOR THE EXERCISE OF DATA SUBJECTS RIGHTS**

| Data Controller: WRAPP | Address: 9 Alexandras Ave., Athens, P.C. 11473  tel .: +30 210 646 2361‬  email: [contact@](mailto:contact@skills4gigs.com)wrapp.ai |
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**APPLICANT'S DATA**

| Name: |  |
| --- | --- |
| Last name: |  |

**What about this application?**

☐ Access

☐ Correction

☐ Delete

☐ Processing Restriction

☐ Portability

☐ Objection to Processing / Withdrawal of consent

**Describe your request:**

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**Choose How You Want to Receive Your Answer:**

| 1. Email ………………………………… |
| --- |
| 1. Mail to the postal address.   Street …………………………………………Number ……City ………………… Post Code……….. |

I declare responsibly that all the information mentioned in the Application is accurate and true.

**Notice**

| We respond to your requests free of charge without undue delay and in any event within one month of receipt of the request. However, that period may be extended by two further months where necessary, considering the complexity and number of the requests. We will inform you of any such extension within one month of receipt of the request, together with the reasons for the delay. Where your requests are manifestly unfounded or excessive, in particular because of their repetitive character, WRAPP may charge a reasonable fee considering the administrative costs of satisfying the request or refuse to act on the request.  Applications are retained for 5 years from receipt.  The personal data you provide hereby is processed by WRAPP, in order to manage your request. In case your request is not satisfied, you have the right to lodge a complaint with the Hellenic Data Protection Authority (<https://www.dpa.gr/en>). |
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Place: ……………. Date: …… /…… / 202……

The Applicant

(Signature)