

National Infrastructures for Technology and Research S.A. -GRNET S.A.

L. Kifisias 7, Ampelokipi, 115 23 Athens

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Email: info-at-grnet.Gr

Application Form for exercising data subjects' rights

In accordance with European Regulation 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data (General Data Protection Regulation - hereinafter referred to as the "GDPR") and Law 4624/2019 (Government Gazette 137/A/2019) "Data Protection Authority, measures implementing Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the processing of personal data and incorporation into national law of Directive (EU) 2016/680 of the European Parliament and of the Council of 27 April 2016 and other provisions', as in force at any time (hereinafter referred to as "the Law"), data subjects are granted with specific rights (data subjects rights).

Such rights shall be satisfied in accordance with the terms and conditions as set out in applicable law, upon mandatory identification of the applicant, and shall be subject to certain restrictions.

In the context of e:Presence service, GRNET S.A. – in its capacity as data controller – shall provide the data subject, at his/her request, with information for exercising any of the following rights, within a time period of one (1) month as of the receipt of the present Form. This period may be extended by two (2) months, as per the provisions of applicable law.

GRNET SA, when processing personal data in the capacity of processor on behalf of an academic or research institution, shall immediately forward any request filed by a data subject with GRNET SA concerning the processing carried out by the institution in the context of providing e:Presence service, and shall assist the institution to fulfill its obligation to respond to such request. GRNET SA shall not be responsible to respond to the data subject's request in such cases.

| Please select the relevant box indicating which of your rights you wish to exercise: | | | |
|--|--|--|--|
| | Right of Access | | |
| | You have the right to request and receive confirmation of whether your data is being processed and, if | | |
| | this is the case, to request the right to access such data as well as to request a copy thereof, in accordance | | |
| | with the terms and conditions of the applicable law. | | |
| | Right to rectify | | |
| | You have the right to request the rectification of any inaccurate data and the completion of any | | |
| | incomplete personal data, in accordance with the terms and conditions of applicable law. | | |
| | Right of erasure | | |
| | You have the right to request that your personal data be erased in accordance with the specific | | |
| | requirements of the legislation in force. | | |
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| | Right to Restrict Processing | | | |
|---|--|---|--|--|
| | You have the right | t, under specific circumstances and on the grounds set out in applicable law, to request | | |
| | that the processing of your personal data be restricted. | | | |
| | Right to Portabilit | ty of Data | | |
| | You have the right to obtain your personal data in a commonly used and machine-readable format as | | | |
| | well as the right to transfer such data to another service, in compliance with the terms and conditions | | | |
| | of the legislation in force. | | | |
| | | | | |
| Pers | sonal information of | of the data subject | | |
| | | | | |
| | Name: | | | |
| | Last name: | | | |
| Please fill in a telephone number and/or an e-mail address so that we may contact you in connection with your Request. It is noted that in case of any doubts arising out with regards to the identity of the applicant, we may request additional information necessary for such identification. | | | | |
| E-mail address: | | | | |
| Telephone | | | | |
| | number: | | | |
| Please fill out relevant information regarding your request | | | | |
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| I solemnly declare that the information provided in this Form is true, accurate, it refers to my person and I | | |
|---|-----------|--|
| ereby exercise | | |
| me of the rights awarded under the provisions of applicable law. | | |
| Name | Signature | |
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