DATA SUBJECT REQUEST

If you want to make a **request or a complaint about the Controller** regarding the processing of your personal data, you can use the following communication channels to exercise your rights.

Using this sample form that can be sent:

• to info@czechmediainvest.cz

- to the email address of the data protection officer: cpo@epholding.cz
- in writing through a postal service provider to the Controller's registered office,
- in writing by personal delivery at the Controller's registered office,
- in writing via the data box;

Without using the sample form in any form whatsoever:

- to info@czechmediainvest.cz
- to the email address of the data protection officer: cpo@epholding.cz
- in writing through a postal service provider to the Controller's registered office,
- in writing by personal delivery at the Controller's registered office,
- you can also exercise your rights orally, by telephone to: +420 232 005 200 or in person at the Controller's registered office,
- in writing via the data box;
- employees of the Controller can also contact the HR manager

PART A

Details of the requester ¹		
Name and surname		
Address		
Telephone		
Email		

PART B

Details of the requester's representative ²			
Name and surname			
Address			

For the sake of completeness, please note that if it is impossible to identify a data subject, even after the data subject has been requested to prove their identity, of which we will duly inform you, the Controller will not allow the exercise of the right.

¹ As the Controller **is obliged** to verify the requester's identity for each request and determine whether a data subject is concerned, you are requested, for this purpose:

a. **to appear in person** at the Controller's registered office to prove your identity by producing an identity document (ID card, driving licence or passport), or

b. to prove your identity by **authentication of your signature** on the document, **or you can use an instrument to ensure reliability**, such as an advanced, recognised or qualified electronic signature.

² Please fill in if the requester (data subject) is represented; in such a case, the request must be accompanied by a **power of attorney bearing the requester's authenticated signature**

Telephone	
Email	

PART C

Identification of the Controller (Please specify the Controller e.g. by stating its trade name or the company
registration number)

PART D

Ple	Please indicate your relationship to the Controller (please mark the appropriate box)		
	Employee		
	Former employee		
	Customer		
	Board member		
	Business partner (self-employed, agent)		
	Job applicant		
	Others (please specify the relationship)		

PART E

cope of the exercise of rights (please ark the appropriate box)	Specification of request
Right of access to information ³	
Right to rectification ⁴	
Right to erasure ⁵	
Right to restriction of processing ⁶	
Right to data portability	
Right to object ⁷	
Right not to be subject to automated individual decision-making, including profiling ⁸	

³ Based on this request, we will provide you with **access to the information** on the processing of the data in questions, in particular, the purposes of processing and categories of personal data. For example, you can state in the specification which personal data your request applies to.

⁴ Which personal data do you wish to be **rectified**?

⁵ Which personal data do you wish to be **deleted**?

⁶ Please state the **reason** for restricting the processing of your personal data.

 $^{^{7}}$ Please $\emph{specify}$ your objection to the processing of your personal data.

⁸ Please describe **what you see** as a decision based solely on automated processing, including profiling that is of direct concern to you.

Di-lat to:the document 49	
Right to withdraw consent ⁹	

Information about the processing of personal data in connection with your request

Based on your request, the personal data you have provided to us will be stored in the Controller's information systems pending the resolution of the issue and for a period of 5 years after the resolution, in the event of judicial or administrative proceedings, for the purpose of obtaining relevant evidence. We would also like to inform you that you have the right to information, the right of access to information, the right to rectification, the right to data portability, the right to erasure, the right to restriction of processing, the right to object to processing and the right to lodge a complaint with a supervisory authority.

In	on			
(Reques	ter's sig	gnatu	re) ¹⁰	

⁹ To **which purpose** does the consent you wish to withdraw apply?

¹⁰ By signing it, you confirm that the information contained in this request **is true**.