

Request to exercise the right of access to personal data

I, the undersigned
identified with Personal Identification Number: , acting as
pursuant to art. 15 of Regulation (EU) No. 679/April 27, 2016 of the European
Parliament and of the Council regarding the protection of individuals in terms to
personal data processing and regarding the free movement of such data, please
inform me if the following personal data relating to me (include the covered
personal data):

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are/have been processed or not within your institution.

Compared to the above, please have control of the legal measures to
receive the information required based on Art. 15 of Regulation (EU) No. 679
/April 27, 2016, at the following address

.....
or

e-mail address (optional)

Date

Signature