

Data Subject Access Right Form

Note: By completing this form, you consent that The Tony Elumelu Foundation. (TEF) would use your personal data to process your request and provide you with relevant response to your inquiries.

Your rights as a data subject can be e	
submitting via an email or to the c	address at the bottom of this form
In Person 🔲	By Proxy 🥅
Date /_/20	
Details of the Person Requesting Information	on
Full Name:	
Date of Birth:	Telephone No:
Contact Address:	
Details of Drows (If Analiseship)	
Details of Proxy (If Applicable)	
Surname/ Family Name:	Tolophono No:
First Name(s)/Forenames: Date of Birth:	Telephone No: Email Address:
Contact Address:	Email Address:
Contact Address:	
Relationship to the data subject:	
A Proxy must enclose a copy of a power of attorney or data subject's written	
authority and proof of the data subject's identity and proxy's identity (such as	
Passport, driving licence, national identity card, birth certificate etc)	
Any other Information that may help us	
Places tiple the appropriate box and read the instructions which follow it:	
Please tick the appropriate box and read the instructions which follow it:	
	the instructions which follow it:
Right of Access []	Right to Erasure []
Right of Access [] Right to Object []	Right to Erasure [] Right to Portability []
Right of Access []	Right to Erasure []

FOUNDATION
Details of Request: Please describe the information you are seeking. Please provide any relevant details you think will help us to identify the information you require.
Preferred Medium of Feedback
 Please tick the appropriate box below: Email as provided in our database []
• Formal letter dispatched to Correspondence Address as provided in our
 database [] The Tony Elumelu Foundation. Office []
I confirm that I have read and understood The Tony Elumelu Foundation Data Subject Access Request Policy and the Data Privacy and Protection Policy. In consideration of all the information stated herein, I certify that the information provided in this form is correct to the best of my knowledge and that I am the person to whom it relates.
Name:
Signature:
Date: For postal requests, please return this form to:
Data Protection Officer
The Tony Elumelu Foundation. Heirs Place
1 MacGregor Road
Ikoyi, Lagos.
All email Requests should be sent to privacy@tonyelumelufoundation.com

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