REQUEST FOR WITHDRAWAL OF CONSENT FOR PERSONAL DATA PROCESSING

In accordance with Article 11 of the Law on Personal Data Protection, you, as the data subject, have the right to withdraw at any time the consent you have given for the processing of your personal data by OKTA AD-Skopje, as the controller of your personal data.

|  |
| --- |
| APPLICANT INFORMATION |
| (Data marked with an asterisk is mandatory for identification of the applicant) |
| FULL NAME: \* |
|  |
| **CONTACT INFORMATION**\* (at least one contact detail is required) |
| Address: |
|  |
|  |
| Email address: |
|  |
|  |
| Contact phone: |
|  |
|  |
|  |
| Based on Article 11 of the Law on Personal Data Protection, I hereby withdraw the consent given to OKTA to process my personal data from the collections, for the following purposes: |
| □ I declare that I withdraw my consent for the processing of my personal data for participation in promotional activities of the company |
| □ I declare that I withdraw my consent for the processing of my personal data for any promotional purposes of the company, direct marketing, personalized marketing offers, promotions |
|  |
| By checking the boxes below, I declare that I do not agree to receive marketing offers or promotions for products and services via the following communication channels: |
| □ Mail |
| □ Email |
| □ SMS |
| □ Phone |
| *OKTA will no longer use your personal data for the above-mentioned purposes, but this will not affect the lawfulness of the processing prior to the withdrawal of consent.* |
|  |
| By signing this request, you confirm that you are the applicant and that the information and statements provided in the request are true and accurate. The controller collects and processes your data stated in this request solely and based on it, for the purpose of conducting the appropriate procedure for exercising your right. |
| If you have any questions, requests, or complaints regarding the processing of your personal data by OKTA, and/or regarding your rights, please contact our Data Protection Officer, **Marija Peshevska-Stanishikj**, at the following contact phone: **02 2532 150** and email: [MPeshevskaStanishikj@helpe.gr](mailto:MPeshevskaStanishikj@helpe.gr).. |

Signature of the applicant:

Date of submission of the request: