

APPLICATION FORM FOR PERMIT TO TRANSFER PERSONAL DATA OUTSIDE THE COUNTRY

I. PARTICULARS OF THE APPLICANT

Name:
Identification Number
Data Controller/ Data Processor
Physical Address:
Postal Address:
Phone Number:
Email Address:

II. PARTICULARS OF THE RECIPIENT

Name:
Identification Number
Data Controller/ Data Processor
The Country of Recipient
Physical Address:
Postal Address:
Phone Number:
Email Address:

III. PARTICULARS OF THE DATA SUBJECT

Name:
Citizenship
Age
Gender
Identification Number:
Phone Number:
Email Address:

(State below if the data subject is a child or a person with disability)

Name:
Citizenship:
Age
Gender
Identification Number:
Relationship with Applicant:
Contact:

I certify that the information provided in this application are true.

IV. THE CATEGORY OF THE PERSONAL DATA TO BE TRANSFERRED

V. THE PURPOSE AND NECESSITY OF TRANSFER THE PERSONAL DATA

VI. STATEMENT OF SECURITY OF PERSONAL DATA IN THE COUNTRY OF RECEIVER:

(Mark with a tick on the appropriate information)

- i. The country you are requesting to transfer personal data has a Personal Data Protection Law;
- ii. A country receiving personal data has ratified the International Convention making provisions in relation to the protection of personal data;
- iii. There is an agreement between the United Republic and the country that receives data on the protection of personal data; or
- iv. There is a contractual agreement between the data applicant and the person receiving the personal data who is outside the country.

VII. DATE AND TIME OF TRANSFER OF PERSONAL DATA

VIII. ANY OTHER INFORMATION NEEDED BY THE COMMISSION

IX. CONSENT OF DATA SUBJECT

I consent to my personal data being transferred outside the country as provided in this form.

SIGNATURE OF THE DATA SUBJECT

DATE:

SIGNATURE OF THE DATA SUBJECT

DATE: