|  |
| --- |
| Request concerning the processing of personal data in the Visa Information System |

**Police Presidium of the Czech Republic**

P. O. Box 62/K-SOU

Strojnická 27

170 89 Prague 7

ID data box: gs9ai55

E-mail: epodatelna.policie@pcr.cz

According to art. 38 of Regulation (EC) No 767/2008 of the European Parliament and of the Council of 9th July 2008 concerning the Visa Information System (VIS) and the exchange of data between Member States on short stay-visas (VIS regulation), in relation with art. 15, art. 16 and art. 17 of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27th April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing the Directive 95/46/EC (General Data Protection Regulation),

**I hereby ask for** *(choose the option)*

**access to personal data**

**rectification of inaccurate personal data**

**erasure of unlawfully stored personal data**

**in the Visa Information System concerning myself.**

1. **Personal data of the applicant** *(Information is used to identify the applicant for the purpose of his identification in the relevant information system and for the purpose of sending the final answer.)*

|  |  |
| --- | --- |
| Given name |  |
| Surname |  |
| Date of birth (day/month/year) |  |
| Genders (M/F) |  |
| Nationality |  |
| Address of the permanent residence (including postcode) |  |
| Contact address  *(Fill in only if it varies from the address of the permanent residence. Regarding the protection of personal data, the final answer is delivered to the addressee only, or to the authorized representative. It is not possible to deliver the final answer by e-mail.)* |  |
| ID data box  *(Fill in only in case of active data box of the applicant - data box of natural person.)* |  |
| Identity card |  |

1. **Representative of the applicant** *(In case of representation of the applicant it is necessary to specify the identification of the representative and at the same time to provide us with a proper authorization.)*

|  |  |
| --- | --- |
| Representative |  |
| Address or ID data box  *(Fill in only in case of active data box of the representative.)* |  |

1. **Attachments** *(a copy of a valid ID – passport, ID card, special or general power of attorney, another valid document…)*

* …………………………………………………………………………………………………
* …………………………………………………………………………………………………
* …………………………………………………………………………………………………

1. **Additional information** *(This is optional information, which can help to process your request.)*

…………………………………………………………………………………………………

…………………………………………………………………………………………………

…………………………………………………………………………………………………

…………………………………………………………………………………………………

…………………………

date

…………………………

signature

**Instructions**

The request must be submitted in writing, i.e., sent to the address of the Police Presidium of the Czech Republic (see contact details above), to the data box of the Police Presidium of the Czech Republic (gs9ai55), via email (epodatelna.policie@pcr.cz) or submitted in person at any registry office of the Police of the Czech Republic during office hours.

The Police of the Czech Republic may refuse to act on the request, if it is manifestly unfounded or excessive, in particular because of the repetitive character.

Regarding the processing of the request, data subject has the right to contact the supervisory authority, i.e., the Office for Personal Data Protection, Pplk. Sochora 27, 170 00 Prague 7, www.uoou.cz. Data subject may seek a judicial remedy.