FORM FOR EXERCISING THE RIGHT OF RECTIFICATION

INFORMATION ABOUT THE PERSON RESPONSIBLE FOR THE FILE OR PROCESSING:

Name: TICBIOMED, TECNOLOGÍAS DE LA INFORMACIÓN DE LA REGIÓN DE MURCIA

Address of the access office: EDIFICIO CEEIM, CAMPUS UNIVERSITARIO DE ESPINARDO, 7, 30100,

ESPINARDO, MURCIA.
REQUESTER'S INFORMATION:
Mr./Mrs, of legal age, residing at No
St., Postal Code City/Town Province
holder of National ID No, a copy of which is attached.
DECLARES:
That by means this written document he/she expresses his/her desire to exercise his/her right of rectification, according to article 16 of Organic Law 15/1999 and articles 15 of Royal Decree 1332/94.
REQUESTS:
1. That the inaccurate information relative to my person, which is kept in the files, be effectively corrected at no cost within a period of ten days counting from the reception of this request.
2. The information that must be amended is listed on the sheet attached to this request, together with the documents that certify, if needed, the accuracy of the new information.
3. That I be notified in writing, at the above-mentioned address, once the information is amended.
4. That, if the amended information was previously communicated, the person in charge of processing shall be notified of the amendment so he/she may also proceed to make the necessary corrections in order to respect the duty of quality of information provided in article 4 of said Organic Law 15/1999.
5. That, if the person responsible for the file considers that said amendment or cancellation does not apply, he/she shall equally communicate it, in a reasoned manner and within the stated ten-day period.
Inon20
Signed:

INSTRUCTIONS:

- 1. In order to prove the inaccurate or incomplete nature of the information contained in the files, it is necessary to provide documentation certifying this to the person responsible for the file. If, on the other hand, the requested amendment depends exclusively on the consent of the affected person, no documentation shall be needed.
- 2. Due to the very personal nature of the personal information it is necessary to attach a photocopy of the ID card or equivalent document that proves the identity of the affected person and that is considered legally valid so that the person responsible for the file may verify it. It may also be exercised through the legal representative, in which case documentation must be provided, in addition to the photocopy of the ID card, which certifies legal representation.
- 3. The domicile is also necessary for notifications, as well as the date and signature of the interested party.

lopd@ticbiomed.org

Right of Rectification Form