NYU GDPR INFORMATION ACCESS, AMENDMENT, AND OTHER RIGHTS

Under the EU’s General Data Protection Regulation, you may have the right to access personal data that we store and process about you, and to request correction of that information if it is inaccurate. If the GDPR applies, you may also have the right to request deletion of certain personal data; ask that we restrict our use of the data; or object to automated decision-making using your data. Access includes, where applicable, the ability to download your personal data in a commonly-used format. Please note we may not be able to grant your request in all circumstances, including when it would adversely affect the rights and freedoms of others.

Please complete the following form and return it via email to GDPR Data Request. You will be notified within 30 days of whether your request has been accepted.

Name:
Date of birth:
Year of graduation (anticipated or actual), if applicable:
Student or Employee ID (N#), if applicable:
Email address:

PERSONAL DATA AT ISSUE AND THE ACTION YOU WISH US TO TAKE

Please describe the personal data at issue, and what you would like to do (e.g., grant you access information).

________________________________________
________________________________________
________________________________________

SUPPORTING DOCUMENTATION (IF APPLICABLE)

If you would like to amend, delete, or restrict our use of your personal data, please attach documentation supporting your contention that the personal data is inaccurate or otherwise describe the basis for your request:

________________________________________
________________________________________
________________________________________
PERSONS TO WHOM PERSONAL DATA SHOULD BE RELEASED

Please identify the person to whom the personal data should be released and fill in the contact details below. You may list yourself if you want to receive the data.

Name:
Address:
Email address:
Phone number:
Fax number:

SIGNATURE

*I confirm that I am the individual described above and that the information on this form is true and correct, to the best of my knowledge.*

Printed Name: ______________________________________________________

Signature: __________________________________________________________

Date: __________________________________________________________________