

Data Subject Rights Request Form

The Personal Data Protection Act B.E. 2562 (2019) ("Act") stipulates various rights that the data subjects or the authorized persons acting on the data subjects' behalf are entitled to submit a request to the Health Intervention and Technology Assessment Program Foundation ("HITAP"), as the data controller, to take an action regarding their personal data in HITAP's responsibility. In case you would like to exercise the data subject rights, please fill out the information in this form and submit this through mail, email (hitap@hitap.net), or in person at HITAP's office.

1. Information	n of Data Subject	
Name-Surname		
ID card number	······································	
Address		
Tel. Number		
Email		
Relationship wi	th HITAP	
	☐ Service User	☐ Contractor
	☐ HITAP's staff	Others (please specify)
	n of Authorized Person attorney-in-fact/agent, or a parent, a guardian,	or a curator of the minor, incompetent or quasi-incompetent data subject.)
Name-Surname	<u></u>	
ID card number	r	
Address		
Tel. Number		
Email		
Relationship wi	th HITAP	
	☐ Parent/minor guardian	☐ Guardian
	☐ Curator	☐ Attorney-in-Fact/agent

(*Minor means a person who are under 20 of age and does not reach the legal age by marriage or acquire the same capacity of a person sui juris according to Section 27 of the Civil and Commercial Code.)

3. The Rights to Be Exercised				
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Right to Withdraw Consent (Please provide information in Clause 4 below)				
Right to Erasure (Please provide information in Clause 5 below)				
Right to Rectification (Please provide information in Clause 6 below)				
Right to Access and/or Obtain a Copy (Please provide information in Clause 7below)				
Right to Data Portability (Please provide information in Clause 8 below)				
Right to Object (Please provide information in Clause 9 below)				
Right to Restriction (Please provide information				
4. Right to Withdraw Consent				
Please specify the consent / the purpose of consent	you would like to withdraw.			
5. Right to Erasure	,			
Please specify the personal data you would like to	Please specify the reason for erasure or destruction			
have HITAP erase or destroy.	of the personal data.			
6. Right to Rectification				
Please specify the personal data you would like to	Please specify the reason for rectification of the			
have HITAP rectify.	personal data.			
7. Right to Access and/or Obtain a Copy				

Please specify the personal data you would like to	Please specify a channel you prefer the information			
access or obtain a copy.	or the copy to be sent.			
8. Right to Data Portability				
Please specify the personal data you would like to	Please specify the organization of destination /			
transfer / receive the transfer.	origin, data format, including other related details.			
9. Right to Object				
Please specify the processing of your personal data	Please specify the reason for objection to the			
you would like to object.	processing of your personal data.			
10. Right to Restriction				
Please specify the personal data you would like	Please specify the reason for restriction of the			
HITAP to restrict the processing.	processing of your personal data.			

7. Supporting Documents

The data subject must enclose the following documents for HITAP to identify and verify your identity and residency so that HITAP could proceed with your request accurately.

- 1. In case of submission by the data subject
 - a. For a Thai nationality, please enclose the data subject's copy of the ID card signed/certified by the data subject. (Please redact the religion and blood type, if any)
 - b. For a foreign nationality, please enclose the data subject's copy of passport signed/certified by the data subject.

- 2. In case of submission by the attorney-in-fact / agent
 - a. Power of attorney, at least, with the term "to authorize the attorney-in-fact or agent to contact HITAP with regard to the exercise of the right to [specify the right] of the principal, as the data subject, carry out all necessary and related actions until completion"
 - b. A copy of ID card / passport of the attorney-in-fact / agent with signature. (Please redact the religion and blood type, if any)
 - c. A copy of ID card / passport of the data subject as specified in No.1.
- 3. In case of submission by the authorized person by law or a court's order
 - a. The document evidencing the authority to act on the data subject's behalf, such as a copy of house registration page showing the relationship with the minor data subject, or a copy of the court's order appointing the guardian or curator (as the case may be).
 - b. A copy of ID card / passport of the parent, guardian or curator with signature. (Please redact the religion and blood type, if any)
 - c. A copy of ID card / passport of the data subject as specified in No.1.

HITAP reserves the rights to request additional information or documents from the requester. In case the provided information could not sufficiently demonstrate that the requester is the data subject or has the authority to act on behalf of the data subject, HITAP reserves the right to dismiss your data subject right request.

8. Disclaimer

- 1. HITAP would need to dismiss your request to comply with relevant law, including but not limited to the followings:
 - a. You fail to clearly establish that you are the data subject or has the authority to submit the request on behalf of the data subject.
 - b. There is no reasonable ground for the request, e.g., you are not entitled to erase the personal data, or such personal data is not in HITAP's control.
 - c. The request is manifestly excessive, e.g. there are several requests of the same nature or unfoundedly repetitive.
 - d. The retention of personal data is for the purpose of freedom of speech, or for preparation of historical documents or archives in the public interest, or for research or statistics with an appropriate safeguard of the data subject's rights and freedom provided. The retention of sensitive data is necessary for compliance with the law to

- achieve the purpose of preventive medicine, occupational medicine or public interest in public health in accordance with Section 26(5) (n) and (n) of the Act.
- e. The retention of personal data is for the purpose of establishment, compliance, exercise or defense of legal claims.
- f. Proceeding with the request will cause an adverse effect to the rights and freedom of other individuals.
- g. The processing of personal data is for HITAP's compliance with the law.
- h. The processing of personal data is necessary for the performance of a task carried out in the public interest by HITAP or it is necessary for the exercising of official authority vested in HTAIP.
- i. The processing is necessary for performance of contractual obligations between the data subject and HITAP.
- j. The processing is necessary for HITAP's legitimate interests.
- k. HITAP processes the personal data as a data processor.
- l. Other reasonable grounds of dismissal in accordance with the Act or as specified other relevant laws.
- 2. HITAP will proceed with your request no later than 30 days after receipt of complete request and other information, including supporting documents. However, the timeline would be extended to 60 days (if necessary) dependent on the complexity and volume of requests.
- 3. If HITAP dismiss your request, HITAP will inform you of the reason for dismissal by mail or email, based on your selected contact channel, to the address of email address as provided in Clause 1 in case of the data subject or Clause 2 in case of the authorized person.
- 4. You would not be charged for your request. However, if your request is unfounded or excessive, HITAP may charge a reasonable the administrative costs of complying with the request.
- 5. HITAP may contact and request you for additional information or documents in case your request is vague, or you did not provide sufficient evidence to HITAP to comply with your request.

9. Acknowledgment and agreement of the data subject / the authorized person

You have read and comprehended this request thoroughly, and you confirm that all the information provided to HITAP is true and correct. You also acknowledge that HITAP is required to identify and verify your authority, identity and residency to comply with your request. HITAP may contact and request you for additional information from you to proceed further correctly and completely with your request. If

the false information is provided with fraudulent / malicious intent, you acknowledge that HITAP wou	blu
be able to commence a legal action against you.	

In this regard, you affix your signature as evidence.

Signature of the data subject/authorized persor
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Date