

CORRECTION REQUEST FORM

I. APPLICATION FOR PERSONAL DATA CORRECTION

1. Under the Personal Data Protection Act 2012 ("PDPA"), you are entitled to correct personal data that we have collected from you.
2. Please complete this form and submit it to:

In person or by post:
Data Protection Officer
Calvary Community Care
147 Potong Pasir Ave
1, #02-83 Singapore

Alternatively, you can email the completed form to us:
care@calvary.sg

II. PARTICULARS OF REQUESTOR

Name of requestor:

Contact number:

Email address:

Please check the applicable box(es):

- I am making a correction request for my own personal data
- I am making a correction request on behalf of other individual(s)

Please complete this section if you are making a correction request on behalf of other individual(s)

Name of other individual(s) whom you are making a correction request on behalf of:

Contact number:

Email address:

III. DESCRIPTION OF THE PERSONAL DATA TO BE CORRECTED

To enable us to process your correction request quickly and efficiently, please provide us with as much information as possible about the personal data you are requesting to correct (e.g. type of personal data, when and how the personal data was provided to us).

IV. PROOF OF IDENTITY

We require evidence that this request is genuine. Please enclose the following proof of identity. If you are applying on someone else's behalf, please enclose the following proofs of identity for the data subject and yourself together with proof of authorisation. Please note that failure to provide these documents with your application may result in a refusal of your request.

I enclose the following with this request:

- Copy of front and back of NRIC
- Copy of front and back of NRIC of data subject (for application on behalf of data subject)
- Authorisation letter from data subject/copy of court order/others, please specify>>: _____
(for application on behalf of data subject)

V. DECLARATION

1. I understand that you may request for further information from me if necessary.
2. By completing and submitting this form, I hereby consent to your collection, use and disclosure of my personal data in accordance with the Privacy Notice which can be found on your website.
3. I understand that you reserve the right to refuse to accede to my request in certain circumstances, such as where exceptions that are provided under the Personal Data Protection Act or other written law apply.
4. I confirm that the information given in this Form and any documents enclosed are true and accurate.

<hr/> Name & Signature	<hr/> Date (DD/MM/YYYY)
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CORRECTION

ACKNOWLEDGEMENT FORM

ACKNOWLEDGEMENT OF PERSONAL DATA CORRECTION REQUEST

Reference Number:
Name of Recipient:
Contact Details:

No	Document/Material	Date Received
1		
2		
3		
4		
5		

<hr/> Signature of Recipient	<hr/> Date (DD/MM/YYYY)
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For Internal Use Only	
Staff of organisation handling correction request:	
Date:	Time: