



# OBJECTION FORM

FOR PERSONAL DATA PROCESSING (pursuant to art.21 of the GDPR)

TO SOUTH-WEST UNIVERSITY "NEOFIT RILSKI"

AS A PERSONAL DATA ADMINISTRATOR

## PHYSICAL ENTITY

Name, Father's name, Surname: ....., BC ID Number  
.....

Contacts: telephone number: ..... e-mail: .....

AUTHORIZED PERSON

PARENT

GUARDIAN

*(Please tick the correct option)*

Name, Father's name, Surname: ....., BC ID Number:  
.....

Contacts: telephone number: ..... e-mail: .....

Power of Attorney № ..... NOTARY PUBLIC ..... Reg.№  
.....

Appendix: Power of Attorney

I herewith object to my personal data processing by the ADMINISTRATOR for the purposes of:

*(The choice is marked with X)*

Direct marketing;

Other grounds pursuant to art.6, para 1, letter d) or letter e) of the GDPR

*(please explain)*

.....  
.....

Structured response format:

*(The choice is marked with X)*

In the ADMINISTRATOR'S office – .....

By Post, Address:

Town/Village of..... Postal Code ..... residential district of  
.....

No .....Str., bl. ...., ent. ...., fl....., ap.....



By e-mail: .....

I am aware of the following circumstances:

In case my request is repetitive in the course of time or is unjustifiable, the ADMINISTRATOR shall have the right to refuse to initiate any actions.

### **Privacy Statement**

You provide your personal data with the aim to process the following application form. Your personal data shall be stored for a period of 12 months by the ADMINISTRATOR after a presented reply to the application form.

THE ADMINISTRATOR processes personal data of physical entities pursuant to their PRIVACY POLICY.

Date:.....

Signature:.....