

## Request to Withdraw Consent

You may only request to withdraw consent for use and disclosure of your personal data that is held by **Singapore Welfare Buddhist Services** (the “**Organisation**”).

In order for the Organisation to respond to your request, please provide the following information and email to: [ • ]

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Contact number: \_\_\_\_\_

Address: \_\_\_\_\_

**Details of withdrawal of consent** (including but not limited to the type of personal data, the date on which and circumstances under which the Organisation may have collected such data, and the specific purpose(s) for which consent is to be withdrawn):



We will respond to your request within 10 working days from the date of receipt of your request. Should we require more time to give effect to your request, we will inform you of the time required for which the withdrawal of consent will take effect. Please note that pursuant to the Personal Data Protection Act 2012 of Singapore, we may continue to use and/or disclose your personal data under certain limited circumstances.

We may ask you further questions, and/or request that you provide evidence, to verify your identity (and if you are submitting this request on behalf of another person, the identity of that person). If you are submitting this request on behalf of another person, please also provide written authorisation.

### Confirmation

I confirm that this request relates to my own personal data and warrant that where I am submitting this request on behalf of another person, I am authorised by such person to submit such request and to provide his/her information for such purposes. I will indemnify the Organisation in respect of any penalties, liabilities, claims, demands, losses and damages as a result of breach of this warranty.

I declare that the information provided in and with this request are true in every respect, and agree that such information may be collected, used and disclosed by the Organisation for the purpose of processing this request and/or in accordance with its data protection policy.

I acknowledge that I am fully aware of the possible consequences of such withdrawal of consent, which may include the inability of the Organisation to render existing services and manage the employment relationship.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For official use	
Received by:	Date:
Processed by:	Date: