REQUEST FORM TO EXERCISE YOUR RIGHTS

This form, set up within the framework of the General Data Protection Regulation (GDPR), enables you to request information on personal data processing managed by the BordeauxPharmacoEpi (BPE) platform or to exercise your rights on your personal data registered in these processing.

To help us to handle your warranty request, please complete at least all the mandatory fields marked with an asterisk(*).

YOUR CONTACT DETAILS

Civility*: ☐ Mrs ☐ Mr

Last name*: .....

First name*: ... .

E-mail address*: .....

Phone number: .....

Company (if applicable): .....

Study ID (if applicable): .....

YOUR MESSAGE

Subject*: ☐ Request to exercise your rights ☐ Other request on data processing

Your message*: .....

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DOCUMENT TO BE ATTACHED TO YOUR REQUEST

In order to exercise your rights on your personal data, please attach a copy of a valid identity document, unless information provided in the above form allow us to formally identify you.

Thank you for sending this(these) document(s) to the following e-mail address:
dpd.bpe@u-bordeaux.fr

Information collected in this form will be used to handle your request. It is intended for the BPE regulatory referent and if applicable, for other BPE persons involved in processing your request.