

**Please complete form in BLOCK letters and tick where necessary.*

DATE

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Passport Photograph

☐ **Data Privacy Notice:** By completing this form, you consent that Union Bank of Nigeria Plc (Union Bank) would use your personal data to process your request and provide you with relevant response to your inquiries.

MODE OF REQUEST } IN PERSON ☐ IN PROXY ☐

DATA SUBJECT RIGHTS

RIGHT OF ACCESS ☐ RIGHT TO ERASURE ☐ RIGHT TO OBJECT ☐ RIGHT TO PORTABILITY ☐

RIGHT TO RECTIFICATION ☐ RIGHT TO RESTRICTION OF PROCESS ☐

Your rights as a data subject can be exercised by completing this form and submitting via an email or to the address at the bottom of this form

TITLE										SURNAME																			
FIRST NAME															OTHER NAME														
DATE OF BIRTH								MOBILE NUMBER								OTHER MOBILE NUMBER													
D D M M Y Y Y Y																													
RESIDENTIAL ADDRESS (SPECIFY NEAREST LANDMARK OR BUS STOP)																													

TITLE	SURNAME	
FIRST NAME	OTHER NAME	
DATE OF BIRTH	MOBILE NUMBER	OTHER MOBILE NUMBER
RESIDENTIAL ADDRESS (SPECIFY NEAREST LANDMARK OR BUS STOP)		
RELATIONSHIP TO THE DATA SUBJECT		

A proxy must provide a copy of the data subject's written authorisation, with proof of both the data subject's identity and the proxy's identity (e.g., passport, Driver's Licence, National ID card, Birth Certificate, etc.)

DETAILS OF REQUEST

Kindly provide a description of the information you seek, along with any relevant details that will assist us in identifying and retrieving it.

PREFERRED MEDIUM OF FEEDBACK

- ☐ EMAIL AS PROVIDED IN OUR DATABASE
- ☐ FORMAL LETTER DISPATCHED TO CORRESPONDENCE ADDRESS AS PROVIDED IN OUR DATABASE
- ☐ UNION BANK OF NIGERIA'S HEAD OFFICE

I confirm that I have read and understood the Union Bank Data Privacy Policy available at www.unionbankng.com. In consideration of all the information stated herein, I certify that the information provided in this form is correct to the best of my knowledge and that I am the person to whom it relates.

NAME: _____

SIGNATURE: _____

DATE: _____

For postal requests, please return this form to:

Data Protection Officer
Union Bank of Nigeria Plc
Stallion Plaza
36 Marina Street
Lagos

All email requests should be sent to dpo@unionbankng.com