



ACCESS REQUEST FORM

I. DATA SUBJECT INFORMATION	
FULL NAME	
ADDRESS	
EMAIL ADDRESS:	MOBILE NO.
II. INFORMATION REQUESTED - <i>Kindly check.</i>	

- ☐ Contents of his or her personal information and categories of data that were processed.
- ☐ Sources from which personal information were obtained, if data was not collected from data subject.
- ☐ Purposes of processing.
- ☐ Manner by which such data were processed.
- ☐ Information on automated processes where the processed data will or is likely to be made as the sole basis for any decision that significantly affects or will affect the data subject.
- ☐ Names and addresses of recipients of the personal information.
- ☐ Reasons for the disclosure of personal information to recipients.
- ☐ Date when the personal information were last accessed and modified.
- ☐ Period for which particular categories of information will be stored.
- ☐ Designation, name or identity, and address of SCCP's data protection officer.
- ☐ Others, please specify details _____.

III. RELEASE OF THE REQUESTED INFORMATION - <i>Kindly check.</i>	
<input type="checkbox"/> Electronic mail	<input type="checkbox"/> Hardcopy

☐ Others (please specify) _____

IV. DECLARATION

I declare that this form is accomplished by the undersigned and is a true, correct, and complete statement of the information contained herein. I also authorize **Securities Clearing Corporation of the Philippines** to verify/validate the contents stated herein.

SIGNATURE OVER PRINTED NAME

Date

V. AUTHORIZED REPRESENTATIVE	
FULL NAME	
ADDRESS	
EMAIL ADDRESS:	MOBILE NO.

I declare that this form is accomplished by the undersigned as the authorized representative of the data subject. It is a true, correct, and complete statement of the information contained herein. Enclosed is the proof of the authority to act on behalf of the data subject. I authorize **Securities Clearing Corporation of the Philippines** to verify/validate the contents stated herein.

SIGNATURE OVER PRINTED NAME

Date

FOR INTERNAL USE ONLY	
RECEIVED BY:	REMARKS:
DATE RECEIVED:	

Instructions: Kindly submit this form to Securities Clearing Corporation of the Philippines ("SCCP") at 6th Floor, PSE Tower, 5th Ave. cor. 28th St., Bonifacio Global City, Taguig, or email it to the Data Protection Officer at sccpdataprivacy@sccp.com.ph. Please present your government issued ID or any valid ID for verification.

Privacy Notice: SCCP will collect, record, store, use, disclose, and process your personal information for the purpose of your request and for purposes relevant thereto. SCCP will retain your personal information as long as necessary and we will safely destroy it after the applicable retention period. You have rights under the Data Privacy Act such as rights to be informed, access, correct, object, withdraw, erasure, data portability, file complaint, and damages. You should be aware that there are risks in the processing of your personal information and for safeguards to protect it, kindly read our Privacy Policy at www.sccp.com.ph or contact the Data Protection Officer at sccpdataprivacy@sccp.com.ph for any concern or for the exercise of your right.