
Data Subject Data Processing Objection Form

Article 21 of the EU General Data Protection Regulation (Regulation (EU) 2016/679) (**GDPR**) grants you the right to object to the London School of Hygiene & Tropical Medicine (**LSHTM**) processing your data when we process your personal data for the following reasons, subject to certain limited exceptions:

- Direct marketing purposes, including profiling related to direct marketing.
- Scientific or historical research purposes or statistical research purposes, unless the processing is necessary for **LSHTM** to perform a task in the public interest.
- Purposes that **LSHTM** considers necessary to perform a task in the public interest under **GDPR** Article 6(1)(e).
- Purposes that the organization considers necessary for **LSHTM**'s or a third party's legitimate interests under **GDPR** Article 6(1)(f).

For information on whether **LSHTM** processes your personal data for the above purposes and to learn about your rights under the **GDPR**, see LSHTM's Privacy Notice available at:

<https://www.lshtm.ac.uk/aboutus/organisation/data-protection/privacy-notices>

We require that you submit this request via email to dpo@lshtm.ac.uk. We will then seek to authenticate your identity.

We expect to respond to your request within one month of receipt of a fully completed form and proof of identity.

I. Requestor Name (Data Subject) and Contact Information

Please provide the data subject's information in the space provided below. If you are making this request on the data subject's behalf, you should provide your name and contact information in Section III.

We will only use the information you provide on this form to identify you and the personal data that is the subject of your objection, and to respond to your request.

First and last name:	
Any other names that you have been known by (including nicknames):	
Home address:	

Date of birth:	
Telephone number:	
E-mail address:	
If you are a current or former employee of LSHTM, please provide your employee identification number and your approximate dates of employment:	

II. Proof of Data Subject's Identity

We require proof of your identity before we can respond to your objection. To help us establish your identity, you must provide identification that clearly shows your name, date of birth, and current address. We accept a photocopy or a scanned image of one of the following as proof of identity: current LSHTM photo ID, passport or photo identification such as a driver's license, national identification number card, or birth or adoption certificate. If you have changed your name, please provide the relevant documents evidencing the change.

If you do not have any of these forms of identification available, please contact the Data Protection Office on dpo@lshtm.ac.uk for advice on other acceptable forms of identification.

We may request additional information from you to help confirm your identity and your right to object. We reserve the right to refuse to act on your request if we are unable to identify you.

III. Requests Made on a Data Subject's Behalf

Please complete this section of the form with your name and contact details if you are acting on the data subject's behalf.

First and last name:	
Home address:	

Date of birth:	
Telephone number:	
E-mail address:	

We accept a photocopy or a scanned image of one of the following as proof of your identity: passport or photo identification such as a driver's license, national identification number card, or birth or adoption certificate. If you do not have any of these forms of identification available, please contact the Data Protection Office on dpo@lshtm.ac.uk for advice on other acceptable forms of identification. We may request additional information from you to help confirm your identity if necessary.

We also require proof of the data subject's identity before we can respond to the request. To help us establish the data subject's identity, you must provide identification that clearly shows the data subject's name, date of birth, and current address. We accept a photocopy or a scanned image of one of the following as proof of identity: passport or photo identification such as a driver's license, national identification number card, or birth or adoption certificate. If the data subject's name has changed, please provide the relevant documents evidencing the change.

We accept a copy of the following as proof of your legal authority to act on the data subject's behalf: a written consent signed by the data subject, or a certified copy of a Power of Attorney.

We may request additional information from you to help confirm your or the data subject's identity. We reserve the right to refuse to act on your request if we are unable to identify the data subject or verify your legal authority to act on the data subject's behalf.

IV. **Objection to Personal Data Processing**

To help us process your request quickly and efficiently, please indicate with a check mark which personal data processing you are objecting to:

Processing for direct marketing purposes, including profiling related to direct marketing.

Processing for scientific or historical research purposes or statistical research purposes.

Processing that the organization considers necessary to perform a task in the public interest under **GDPR** Article 6(1)(e).

____ Processing that the organization considers necessary for the organization's or a third party's legitimate interests under **GDPR** Article 6(1)(f).

If you object to personal data processing for direct marketing purposes, we will no longer process your personal data for those purposes. For personal data processing objections other than direct marketing purposes, **LSHTM** may continue to process personal data that is the subject of your objection under certain circumstances. If we cannot honour your personal data processing objection, we will inform you of the reasons why, subject to any legal or regulatory restrictions.

Applicable law may allow or require us to refuse to act on your processing objection, or we may have destroyed, erased, or made your personal data anonymous in accordance with our record retention obligations and practices. If we cannot honour your processing objection request, we will inform you of the reasons why, subject to any legal or regulatory restrictions. If we determine that the personal data you are objecting to is not subject to Article 21, we will inform you of this decision.

We will begin processing your objection request as soon as we have verified your identity and have all of the information we need to locate your relevant personal data.

V. **Signature and Acknowledgement**

I, _____, confirm that the information provided on this form is correct and that I am the person whose name appears on this form. I understand that: (1) **LSHTM** must confirm proof of identity and may need to contact me again for further information; and (2) my request will not be valid until **LSHTM** receives all of the required information to process the request.

Signature

Date

VI. **Authorized Person Signature**

I, _____, confirm that I am authorized to act on behalf of the data subject. I understand that **LSHTM** must confirm my identity and my legal authority to act on the data subject's behalf, and may need to request additional verifying information.

Signature

Date