**REQUEST TO EXERCISE THE RIGHT TO OBJECT TO PERSONAL DATA PROCESSING**

Pursuant to Article 25 of the Law on Personal Data Protection, (*Official Gazette of the Republic of North Macedonia* Nos 42/20, 294/21, and 101/25), the Agency for Audio and Audiovisual Media Services enables personal data subjects to freely exercise their right to object.

The Agency for Audio and Audiovisual Media Services shall take all the necessary steps to respond to the subject’s Request within 30 days of receiving the Request, or from the receipt of further information in case the initial Request has been unclear or incomplete.

**1. Information about the Request Submitter**

|  |  |
| --- | --- |
| Full name |  |
| Data subject’s category (employee, external associate, job applicant, participant in activities) |  |
| Address |  |
| Contact phone number |  |
| e-mail address |  |

**2. Data processing to which the data subject files an objection**

Please indicate by circling the type of processing you are objecting to:

* Personal data processing based on public or legitimate interest, including profiling
* Personal data processing for direct marketing and related profiling purposes
* Personal data processing for scholarly or historical research, or for statistical purposes

**3. Which data processing are you objecting to?**

Please specify the type of processing of your personal data you are objecting to, stating all the relevant details that will help us identify the personal data processing activities you are objecting to (personal data categories, date and method of consent given, etc.)

The Agency for Audio and Audiovisual Media Services shall cease any further processing of your personal data which you have objected against, unless there are relevant legitimate interests overriding the interests, rights and freedoms of the personal data subject.

**4. ACKNOWLEDGEMENT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby acknowledge that I have read and understood the information contained in this Request and that the information I have provided are accurate. I understand that the Agency for Audio and Audiovisual Media Services may request verification of my identity and/or the identity of the personal data subject, as well as additional information to help identify the personal data the processing to which I am objecting.

**Signature**                                                             **Date**
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                                            \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Documents attached to the Request:**

* Proof of identity of the personal data subject (when the submitter of the Request is an authorized representative)
* Authorization by the personal data subject
* Justification of the Request (detailed explanation in accordance with Point 3)