

## CONSENT WITHDRAWAL FORM

Under the Singapore Personal Data Protection Act (PDPA), you are entitled to withdraw or modify your consent for the collection, use, and/or disclosure by us of your personal data. Please note that there may be consequences which may arise from the withdrawal / modification of your consent. We shall inform you of any such consequences depending on the nature of the withdrawal or modification you are requesting.

Please refer to our Privacy Policy Statement for more details (<https://sasco.org.sg/privacy-policy/>)

Please email the completed form to our DPO: [dpo@sasco.org.sg](mailto:dpo@sasco.org.sg)

<b>Your Particulars:</b>	
Name:	
Contact Number:	Email:
<b>Description of Consent to be Withdrawn or Modified</b>	
To enable us to process your withdrawal / modification of consent efficiently, please provide us with as much information as possible about the processing activities where you wish your consent to be withdrawn or modified.	
Please check the applicable box:	
<input type="checkbox"/> I am the owner of personal data (data subject). <input type="checkbox"/> I am making this personal data withdrawal request for another person.	
Please complete this section if you are making the request on behalf of another individual:	
Name of the individual whom you are making a withdrawal request on behalf of:	
Your Relationship with the other individual:	
Reason(s) for making this withdrawal request on behalf of the other individual:	
Are you authorized to make this data correction request? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Please provide evidence of authority to request e.g., letter of authorization)</i>	
<b>Withdrawal Consent</b>	
<input type="checkbox"/> I withdraw consent to SASCO Senior Citizens' Home processing the specific personal data listed below:	
<b>AND / OR</b>	



I withdraw consent to SASCO Senior Citizens' Home using my personal data for the following purposes:

**Declaration**

By submitting this form, I confirm that the information stated above is true, complete and accurate to the best of my knowledge and belief.

	Click or tap to enter a date.
Name & Signature	Date

**Note:**

1. Upon receiving your complete Form, we may require further information to verify your identity before we may process your request.
2. Having received and verified your identification, we shall endeavor to respond to your request within 10 business days. In the event we need more time to verify and fulfill the request, we shall inform you of the additional time needed via the contact information you provided in this Form.
3. We would like to highlight to you that, pursuant to the PDPA, we shall cease (and cause our Data Intermediary to cease) collecting, using or disclosing your personal data, unless such collection, use or disclosure, as the case may be, without your consent is required or authorized under the PDPA or other written laws.