



DATA SUBJECT CONSENT WITHDRAWAL FORM

I, _____ (data subject name), would like to withdraw my consent to process my personal data by **iheed Training Ltd**. Thus, **iheed** no longer has my consent to process my personal data of for the purpose of _____

(specify legitimate reason of processing personal data), which was previously granted.

The withdrawal of consent does not affect the lawfulness of the processing activities up to this point.

Please provide the following information to help us identify you in our systems:

Full Name: _____

Email: _____

Date of Birth: _____

Please provide a copy of your ID and address proof documents (including a government issued ID document) along with this request so that we can confirm your identity.

Please send this request to privacyofficer@iheed.org.