

REQUEST FOR INFORMATION / CORRECTION OF INFORMATION

Things to Note

1. Please complete this form in the English language. AXS will refuse to comply with your request if your request is not made in the English language.
2. Please note that AXS may refuse to disclose or amend any information for the reasons set out in the Personal Data Protection Act 2012.
3. It is important that you specify in this form clearly and in detail the personal data which you request information or correction. AXS may refuse to comply with your request if you have not provided the information which AXS reasonably requires you to do so.
4. Please attach separate sheets if necessary.

Section A: Details of requestor

Type of Request

Please tick where applicable

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Correction of personal data (you will not need to fill in Section D) |
| <input type="checkbox"/> | Access to personal data (you will not need to fill in Sections C and D) |
| <input type="checkbox"/> | Withdrawal of consent to use of personal data (you will not need to fill in Section C) |

Requestor's Particulars

Name	: <i>If you were previously known by another name, please also state your previous name(s). Please also indicate the time period that you have used such name(s).</i>
Gender	: Male / Female*
Identification No	: NRIC / Passport No.*
Address	:
Previous Address	: <i>Complete this section if you have lived at your current address for less than one year. Please also indicate the time period that you have lived at each address.</i>
Telephone No	: <i>If you have previously used other telephone number(s), please also state your previous number(s) and the time period that you have used each number.</i>
Email	: <i>State all your email addresses. If you have previously used other email addresses, please also state your previous email addresses and the time period that you have used each email address.</i>

(*Please delete where applicable)

Proof of Identity

Please enclose **certified true copies** of one of the following documents. Please tick where applicable.

<input type="checkbox"/>	A validly signed passport, including photograph
<input type="checkbox"/>	A valid Singapore driving licence
<input type="checkbox"/>	National identity card

Section B: Describe how you provided your personal data to AXS

Please indicate the date on which you have provided your personal data to AXS, and the reason for doing so. Please provide as much information as possible.

Please tick where applicable

<input type="checkbox"/>	Job Application	<input type="checkbox"/>	Commercial Relationship
	Date:		Date:
<input type="checkbox"/>	Visit to AXS premises	<input type="checkbox"/>	Bill payment
	Date:		Date:
<input type="checkbox"/>	Employment / secondment / internship	<input type="checkbox"/>	Others (please specify)
	Date:		Date:

Please indicate to whom your personal data was provided to:

Person-in-charge :	
Office/Department :	
Reference No (if any) :	

Only complete this section if you require a recording of a **telephone call**:

Date of telephone call :	
Time of the call :	
Your telephone number at time of call :	
Your name at time of call :	

Section C: Request for Correction

Please complete this section if you are requesting for a correction of your personal data.

<i>Type of Personal Data</i>	<i>Before Correction</i>	<i>After Correction</i>

Section D: Cessation of use of personal data

Specify the particulars of the personal data that you wish for AXS to cease using. You consent to AXS contacting you to inform you of the consequence of such withdrawal of consent.

Section E: Declaration of requestor

I confirm that I am the requestor named in Section A, and I am submitting this form in relation to my own personal data. I confirm that the information provided herein is true and accurate. I understand that the information that I have supplied will be used to confirm my identity and help locate the information that I have requested. I also understand that it may be used for statistical and monitoring purposes.

Signature: _____

Date: _____