

PERSONAL DATA REQUEST TO THE FINNISH INSTITUTE OF OCCUPATIONAL HEALTH

Identification data

Name:

Other identifying information (e.g. personal identity code):

Telephone number:

Email address:

Postal address:

Date:

Signature:

Type of request

I want access to my data, i.e. to inspect my data

I want to rectify my data

I want to erase my data

I want to transfer my data to another controller

I want to restrict the processing of my data

I want to object to the processing of my data

I want to prohibit direct marketing

I want to opt out from automated decision-making

I want to withdraw my consent

I want to file a document request regarding personal data in accordance with the Act on the Openness of Government Activities

I want to request health care event or log data

Register related to the request:

Instructions

The appendix explains what information is required for each personal data request. Fill in the form and return it to the Finnish Institute of Occupational Health's Data Protection Officer by mail or secure email:

Postal address: Finnish Institute of Occupational Health, Data Protection Officer, P.O. Box 40, FI-00032 Finnish Institute of Occupational Health

Secure email: <https://www.turvaposti.fi/viesti/ttl.tietosuoja>

If you wish to send a secure email message, you must have a valid email address and telephone number in order to communicate securely with the Finnish Institute of Occupational Health.

The Data Protection Officer can be reached by calling +358 (0)30 474 2429 or sending email to [tsv\(at\)tvl.fi](mailto:tsv(at)tvl.fi) (general matters).

Personal data request description (see appendix for required information):

APPENDIX: Information required for various personal data requests

I want access to my data, i.e. to inspect my data

In your request, please specify

- what data you want to inspect
- whether you want to inspect all of your data or data for a specific period of time

I want to rectify my data

In your request, please specify

- what data your request concerns
- how the information should be modified
- justification for your proposed modifications

I want to erase my data

In your request, please specify

- the data to be deleted
- justification for deletion

I want to transfer my data to another controller

In your request, please specify

- do you want the controller to provide the data to you or to transfer it directly to another controller

I want to restrict the processing of my data

In your request, please specify

- justification for the restriction of processing

I want to object to the processing of my data

In your request, please specify

- justification for objecting to the processing

I want to prohibit direct marketing

In your request, please specify

- that you want to prohibit direct marketing (no justification required)
- you can also send a direct marketing prohibition directly to: [viestinta\(at\)tll.fi](mailto:viestinta(at)tll.fi)

I want to opt out of automated decision-making

In your request, please specify

- the action you want the controller to take
- justification for the request

I want to withdraw my consent

In your request, please specify

- that you want to withdraw your consent (no justification required)

I want to file a document request regarding personal data in accordance with the Act on the Openness of Government Activities

In your request, please specify

- which document(s) the request concerns
- justification for the request (is the document about you or the way in which it involves you)

I want to request health care event or log data

In your request, please specify

- the timeframe for which you wish to receive the data (the right to receive data concerns a maximum of two years or, for special reasons, more than two years)
- justification if you want log data for a period longer than two years