

DATA SUBJECT RIGHTS REQUEST FORM

This form is for your request to exercise your rights with respect to your personal data under the Personal Data Protection Act, B.E. 2562 (A.D. 2019) (“PDPA”). Please fill in this Data Subject Rights Request Form (“Form”), in order to enable Kumon (Thailand) Co., Ltd. (“Company”) to respond to your request.

Part 1: Information about the applicant

Full name	
Address	
Telephone number	
Email	

To facilitate the verification of the applicant, please provide your national identification card, or a similar identification document, when submitting this Form in person. If you are submitting this Form through electronic means, the Company may request additional information or documents as the Company deems appropriate.

Part 2: Status of the applicant

- Are you the data subject of the personal data for which you wish to exercise your rights?

- Yes, I am the data subject of this personal data.
- No, I am not the data subject.* (In this case, please provide the following information.)

Full name	
Identification Card No./ Passport No.	
Reason for acting as a representative	

*In cases where you are not the data subject, you are required to submit to the Company a Power of Attorney, with the applicable stamp duty. The Company may request additional evidence to verify the Power of Attorney, including, but not limited to, identification documents, such as national identification cards, passports, etc.

Part 3: Details of the request

- What is your status or relationship with the Company?

- | | | |
|---|---|---|
| <input type="checkbox"/> Customer (parent) | <input type="checkbox"/> Customer (student) | <input type="checkbox"/> Instructor |
| <input type="checkbox"/> Assistant instructor | <input type="checkbox"/> Job applicant | <input type="checkbox"/> Employee |
| <input type="checkbox"/> Former employee | <input type="checkbox"/> Business partner | <input type="checkbox"/> Employee of a business partner |
| <input type="checkbox"/> Others (Please specify): _____ | | |

- For which of the following matters do you wish to exercise your rights?

I would like to request to exercise the following right(s) in respect to the personal data:

- Right to have access to my personal data that is in the Company's possession
- Right to obtain a copy of my personal data that is in the Company's possession
- Right to request the disclosure of the source of my personal data that the Company collected without my consent
- Right to obtain my personal data in a machine-readable format
- Right to have my personal data transmitted in a machine-readable format to another data controller
- Right to object to the collection, use, or disclosure of my personal data
- Right to request that the collection, use, or disclosure of my personal data be suspended
- Right to request that my personal data be deleted or destroyed
- Right to request that my personal data be de-identified
- Right to request that my personal data be rectified, updated, or completed
- Right to withdraw my consent

Remarks: If you are not the data subject, the term "personal data" above shall mean the personal data of the data subject, who has authorized you to request the exercise of their rights on their behalf in this Form.

- Relevant Information

(i) Please indicate the relevant types of personal data that is the subject of this Form:

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(ii) If you request that the Company transmit your personal data in a machine-readable format to another data controller, please provide the following information:

Name of the other data controller	
Telephone number	
Email	
Types of personal data to be transmitted	
Expected date of transmission	

- Please provide additional information below (if any):

Part 4: The Company's action after the submission of this form

The Company will examine your request, and contact you within the time period specified by law. The Company may contact you through the contact details provided in Part 1, in order to request further information.

In any case, the Company reserves the right to restrict its fulfilment of, or to refuse or object to, your request in any of the following cases:

- 1) The Company does not have the subject personal data in its possession;
- 2) The Company cannot fulfil your request due to legal obligations, or an order of a competent officer, authority, or court;
- 3) This Form does not provide complete information, or contains incorrect information;
- 4) You cannot verify your identity; or
- 5) The Company may refuse to fulfil your request under the conditions or limitations provided for by the PDPA.

Part 5: Warranty

I hereby confirm that I have read and understood the terms of this Form. I also confirm that the information provided in this Form is correct, and that I have valid rights to exercise the data subject rights as indicated in this Form. I therefore sign below as evidence.

Signature: _____

Full name: _____

Date: _____

Remarks:

- (1) After you have completed this Form, please send it along with supporting documents to the Company, at: privacy@kumon.co.th.
- (2) Should you have any inquiries in respect to how to complete this Form, please send your inquiries to: privacy@kumon.co.th, or call the Data Protection Team at: 0 2626 6555.