

DATA SUBJECT CONSENT WITHDRAWAL FORM

I, _____ withdraw my consent for the processing of my personal data from Rafiki Microfinance Bank Limited and all its third-party processors. Rafiki Microfinance Bank Limited no longer has my consent which was previously granted to process my personal data for the purpose of (tick as applicable);

- Assessing my application and making decisions as to whether the Bank is able to provide me with the products/services I have requested.

- Receiving marketing communications from Rafiki Microfinance Bank Limited relating to its products and services as well as for products and services from other members of the Bank's group which may be of interest to me.

Please note that

- Withdrawing consent in relation to marketing materials will not impact upon that information which we are required to send you as part of your ongoing contract with us in relation to services and/or products or other lawful bases outlined above.

- Withdrawing consent does not affect the legality of data processed prior to such withdrawal.

Instructions

- *Documentary evidence in support of the application shall be required. Acceptable forms of identity are copies of either a National Identity Card or Passport.*

- *Please note that if you are making this request on behalf of someone else you will need to supply your information, their information, evidence of their identity and some form of proof (for example a signed letter of authority, power of attorney or some other evidence that you are their legal representative) that you have the authority of the person whose data you are seeking to access.*

- *All fields with (*) are mandatory.*

ID / Passport No*		Phone Number*
Email Address*		
Signature*		Date*

Provide the following details where making a request on behalf of a minor or a person who has no capacity:

Name*	
Relationship with the data subject *	
Contact information*	

I have attached the required documentary proof.

ID / Passport No*	Signature*	Date*