SAMPLE APPLICATION FORM

SIRENE Latvia National Unit
State Police of the Republic of Latvia
Ciekurkalna 1.linja 1, k-4,
Riga, LV-1026
Latvia
E-mail address: kanc@vp.gov.lv

or

The corresponding diplomatic or consular representation of the Republic of Latvia
(Please indicate a specific representation and its address)

Name, surname of the Applicant: ..............................
Address: ..........................................................
..........................................................
E-mail address (if the application is signed with a secure electronic signature):
..........................................................

Application.

Based on this application I would like to receive the following information regarding my personal data processing within the second generation Schengen Information System (SIS II):

☐ I would like to know if my personal data are in the SIS II;
☐ I would like to request to change my personal data that is in the SIS II;
☐ I would like to request the deletion of my personal data in the SIS II;
☐ I would like to receive information regarding the recipients of my personal data from the SIS II.

Information about me as the data subject:
- Name (names), surname: ..........................................................
- Date of birth: ..........................................................
- Personal identity number (if any): ..........................................
- Place of birth: ..........................................................
- Nationality: ..........................................................
- The type, number, issuing authority, date of issue and term of validity of a personal identification document (if any): ..........................................................
- The given name, surname, personal identity number (if any) and the date of birth of the authorized person (if information is requested by the authorized person).

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2 For additional information please refer to the Cabinet of Ministers Regulation of 11 September 2007, No.622 “Procedures for the Request and Issue of Information Regarding a Data Subject that is Kept in the Schengen Information System and the SIRENE Information System”, available on http://www.likumi.lv/doc.php?id=164148&from=off.
I would like to receive the information requested in the following way (ex., appearing in person in the State Police institution or diplomatic/consular mission or sending information to the indicated address):

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Please, pay attention that the data subject, submitting the application, shall confirm his or her identity by providing a personal identification document. The authorized person shall present a notary-certified power of attorney that gives the right to receive information regarding the data subject or shall present a document that confirms the rights of parents, adopters, guardians or trustees. If the application is submitted electronically, the identity of the data subject shall be confirmed by a secure electronic signature.

Date: ......................... Signature: .................................