PODNOSITELJ

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*Ime i prezime*

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*OIB*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Kontakt*

**ZAHTJEV**

**za prijenos osobnih podataka**

U skladu s čl. 20. Opće uredbe o zaštiti podataka (EU 2016/679), odredbama Zakona o provedbi Opće Uredbe o zaštiti osobnih podataka (NN 42/2018) te Pravilnika o obradi i zaštiti osobnih podataka Hrvatskog katoličkog sveučilišta podnosim zahtjev Hrvatskom katoličkom sveučilištu, Ilica 242, Zagreb za prijenos mojih osobnih podataka *(navesti osobne podatke)*

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koje sam ustupio Hrvatskom katoličkom sveučilištu kako bi iste dostavio drugom voditelju obrade.

Zagreb, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *Potpis podnositelja*

\*Obrazac služi kao temelj za obradu podataka

*(Tražene podatke upisujte čitko tiskanim slovima)*

*\**Pojmovi koji se koriste u ovoj Izjavi obuhvaćaju na jednak način muški i ženski rod