

Erasure request / Pedido de apagamento de dados no SIS

Ex.^{mo} Senhor Coordenador,
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According to article 53(1) of Regulation (EU) 2018/1861, article 67(1) of Regulation (EU) 2018/1862, and article 17 of Regulation (EU) 2018/679, I hereby request the **erasure** of my personal data in the Schengen Information System (SIS), based on the reasons described below.

Given Name(s)

Surname(s)

Nationality | | Date of birth/...../..... (dd/mm/yyyy)

Country/ Place of birth

Address

..... | Postal Code

Telephone/.....

Email: _____

Fill in legibly, preferably in printing capital letters.

Reasons for the erasure of my personal data:

.....
.....
.....

Identification Document:

Passport no. | Issue date/...../..... (dd/mm/yyyy)

Other? Specify | Issue date/...../..... (dd/mm/yyyy)

Application date/...../..... (dd/mm/yyyy)

The Applicant

.....
(signature)

Annexed documents:

Passport copy

Resident permit copy

Others

Observations/Remarks:

The application must have an AUTHENTICATED copy of your identification document (passport or other document).