

Data Request Form

We require that you submit this request in writing or electronically, along with proof of your identity.

We expect to respond to your request within one month of receipt of a fully completed form and proof of identity.

I. Data Subject Information

Please provide the data subject's information in the space provided below. [If you are making this request on the data subject's behalf, you should provide your name and contact information in Section III.]

We will only use the information you provide on this form to identify you and the personal data you are requesting access to, and to respond to your request.

Data subject Type:	<input type="checkbox"/> Applicant/Employee/Former Employee <input type="checkbox"/> Customer/Prospective Customer <input type="checkbox"/> Vendor/Supplier <input type="checkbox"/> Subcontractor/Service Partner
Data subject name\aliases:	
If you are a current/former employee, provide your employee identification number:	
Provide other unique identifiers or related information to help us locate your data (for example, government identification number or customer account number):	

II. Proof of Data Subject's Identity

We require proof of your identity before we can respond to your access request. To help us establish your identity, you must provide identification that clearly shows your name, date of birth, and current address. If you have changed your name, please provide the relevant documents evidencing the change.

We may request additional information from you to help confirm your identity and your right to access, and to provide you with the personal data we hold about you. We reserve the right to refuse to act on your request if we are unable to identify you.

III. Requests Made on a Data Subject's Behalf

Please complete this section of the form with your name and contact details if you are acting on the data subject's behalf. Include a copy of Power of Attorney documentation if applicable.

First and last name:	
Relationship to Data Subject:	

IV. Data Request Details

I am requesting:

- Data Access
- Data Erasure
- Data Modification

Write in the below area the details of your data request. To help us process your request quickly and efficiently, please provide as much detail as possible about your data request. Include time frames, dates, names, types of documents, file numbers, or any other information to help us locate your personal data.

We will contact you for additional information if the scope of your request is unclear or does not provide sufficient information for us to conduct a search (for example, if you request "all information about me").

If the information you request reveals personal data about a third party, we will either seek that individual's consent before responding to your request, or we will redact third parties' personal data before responding. If we are unable to provide you with access to your personal data because disclosure would violate the rights and freedoms of third parties, we will notify you of this decision.

Applicable law may allow or require us to refuse some or all your data request. If we cannot provide you with access to your personal data, we will inform you of the reasons why, subject to any legal or regulatory restrictions.

V. Signature and Acknowledgement

I, _____, confirm that the information provided on this form is correct and that I am the person (or authorized to act on behalf of the data subject) whose name appears on this form. I understand that: (1) Daktronics must confirm proof of identity and may need to contact me again for further information; (2) my request will not be valid until Daktronics receives all of the required information to process the request; and (3) I am (on behalf of data subject) entitled to one free copy of the personal data I have requested, and acknowledge that for any further copies I request, Daktronics may charge a reasonable fee based on administrative costs.

Signature

Date

Provide contact information to be used while processing this data request:

Phone Number:	
Email Address:	

Submit this completed form and proof of identity to:

Privacy@daktronics.com or
Attn: Legal Department
201 Daktronics Drive
PO Box 5128
Brookings, SD 57006-5128