

**Right to Be Forgotten/Right of Erasure Request**

Full name:

Current email address:

1) Please indicate your affiliation with Penn State:

□Applicant □Undergraduate □Student □Graduate Student

□Faculty □Staff □Other (please indicate:)

2) Please indicate your Penn State affiliation status:

□Currently affiliated □Formerly affiliated

3) Please provide your current/former Penn State ID:

4) Are you a citizen of a European Union (EU) Member State?

□Yes □No

If yes, please list the Member State:

5) Are you currently located in an EU Member State?

□Yes □No

If yes, list the Member State:

6) Please indicate the types of data you would like to be erased:

**Please email your completed form to** [**privacy@psu.edu**](mailto:privacy@psu.edu)**. A member of the Privacy Office will review your request.**

**Also, please note, that this form only applies to the requirements outlined in EU’s General Data Protection Regulation (GDPR). Institutions of higher education are exempt from most of the state-specific consumer data protection laws. For more information, please email,** [**privacy@psu.edu**](mailto:privacy@psu.edu)**.**