



Authorized Agent – Verification Form

If an Authorized Agent is making a Data Subject Rights Request on behalf of a Data Subject, the Authorized Agent must provide the following information, sign this form (along with the Data Subject) and email dataprotection@flightsafety.com to arrange for secure transmission.

1. Name of Authorized Agent: _____
 - a. Email address: _____
 - b. Telephone number: _____

2. Name of Data Subject: _____
 - a. Data Subject’s Relationship with FlightSafety – (Circle One) Customer, Client, Contractor, Applicant, Teammate, Other
 - b. Data Subject’s Client or Customer Number (if known) _____
 - c. Please attach a copy of Data Subject’s written authorization for Authorized Agent to act on Data Subject’s behalf or a valid power of attorney

3. Authorized Agent’s California Secretary of State Registration No. (required for California Residents):

4. Details Regarding Data Subject Rights Request:

AUTHORIZED AGENT	DATA SUBJECT
By signing below, Authorized Agent confirms that the information above is accurate and that the Authorized Agent has the proper authority to make the requests herein on behalf of the Data Subject identified above. _____ Name: Date:	By signing below, the Data Subject confirms that the Authorized Agent has the proper authority to make the requests set forth above. _____ Name: Date: