REPUBLIC OF RWANDA



NATIONAL CYBER SECURITY AUTHORITY DATA PROTECTION & PRIVACY OFFICE

CHANGE REPORT FORM AS A DATA PROCESSOR

Note: Before filling out this form, consult the guide available on $\underline{www.dpo.gov.rw}$

SECTION 1 – DATA PROCESSOR DETAILS							
OPERATIONAL DETAILS							
Data Processor Name:							
Data 110005501 Italia.							
Registration Number as DATA PROCESSOR		Issued On	Valid Until				
		/	/				
NATURE OF DATA PROCESSOR							
Tick as appropriate							
□ Public □ Private □ NGO □ Faith Based organization □ Political organization □ Development Partner □ Other:							
Sector	Financial (Refer to Guide- Annex I)						
Address:	Country, Province, District, Sector						
Phone Number:	+xxxx xxx xxxx						
Email Address:	abc@abc.com						
Website:	www.abc.com						
CONTACT PERSON (DATA PROTECION OFFICER)							
Name:	Name						
Phone Number:	+xxxx xxx xxxx						
Email Address:	aassc@abc.com						
REPRESENTATIVE IN RWANDA (if Data Processor is established outside of Rwanda)							
Name:	Representative name						
Phone Number:	+xxxx xxx xxxx						
Address:	Country, Province, District, Sector						
Email:	aassc@abc.com						
Website:	www.afc.com						

cription of Sonal Data name, address, tional Identity per,etc) , phone number	PURPOSE OF PROCESSING (e.g., service provision, HR management, invoicing, Know Your Customer (KYC), etc).	CATEGORY OF RECIPIENT(S) TO WHOM PERSONAL DATA IS DISCLOSED (e.g., Regulators, Partners, Investors, etc.) Regulators: RURA, BNR	GROUND FOR PROCESSING (Tick as appropriate) Consent of data subject				
, phone number	Service provision		subject				
			☐ Contractual necessity ☐ Legal obligation ☐ Vital interests of the data subject or other person ☐ Public interest ☐ Performance of duties of public entity ☐ Legitimate interest ☐ Research upon authorization				
SECTION 3 – CATEGORIES OF SENSITIVE PERSONAL DATA Applicable Not Applicable (Tick as appropriate) If applicable, please fill in the below details otherwise proceed to section 4.							
ATA PF	ECIFY PURPOSE(S) FOR ROCESSING SENSITIVE ERSONAL DATA	GROUND FO	ND FOR PROCESSING s appropriate)				
,.	☐ Obligation data processorights of the ☐ Vital inter other person ☐ Preventive public health ☐ Archiving		of the data controller/ or exercising specific				
	nation	nation	data processor rights of the data processor r				

SECTION 4 – PROCESSING AUTHORIZATIONS							
Please list your Data Controllers in the section below							
NAME OF DATA CONTROLLER(S)	DO YOU HAVE WRITTEN DATA PROCESSING CONTRACT(S) WITH THE DATA CONTROLLER(S)?		ARE YOUR DATA CONTROLLER(S) REGISTERED WITH DATA PROTECTION AND PRIVACY OFFICE?				
Data Controller(s)	☐ YES ☐ NO (T	ick as appropriate)	☐ YES ☐ NO (Tick as appropriate)				
_		SONAL DATA OUT					
		plicable (Tick as appro e section below, otherw	opriate) wise proceed to section 6				
			•				
List countries							
Note: You will need to apply for a sepan	rate authorization to tr	ansfer personal data o	utside of Rwanda				
		ROTECTION OF PE					
RISKS TO PERSONAL DATA (e.g., unauthorized access/disclosure, or theft.)		SAFEGUARDS, SECURITY MEASURES AND MECHANISMS IMPLEMENTED TO PROTECT PERSONAL DATA (e.g., access control, visitors' logbook, encryption or other information security measures.)					
Unauthorized access		Access control and Encryption					
Do you store personal data outside o	of Rwanda? YES	□ NO (Tick as appro	priate)				
If YES, you will need to apply for a se	parate authorization to	o store personal data o	utside of Rwanda.				
\Box I certify that the above information is correct and complete and hereby report a change after receiving a registration certificate as a Data Processor under the Law No 058/2021 of 13/10/2021 relating to the protection of personal data and privacy.							
Signature:		Date:	Date:				
Name:							
(Person authorized to sign on l	hehalf of Data Process	or)					