Submission (complaint) to the Ombudsman

Who is writing to the Ombudsman? Who needs help?

Persor	n - natural person
Name	e and surname:
Date	of birth:
Perm	anent residence:
Phone	e: We will call you if we do not understand something.
I wish	the Ombudsman would write to me (select):
	by post (address, if different from permanent residence):
	by e-mail:
	to the data box:
Legal p	person
Name	
Regis	tered office:
Name	e and surname of the person authorised to act:
Phone	e: We will call you if we do not understand something.
I wish	the Ombudsman would write to me (select):
	by post (address, if different from registered office):
	by e-mail:
	to the data box:
	ou writing for someone else? Please give your details and attach a power corney or write it down (on the next page).
Name	e and surname:
Date	of birth:
Perm	anent residence:
Phone	e: We will call you if we do not understand something.
I wish	the Ombudsman would write to me (select):
	by post (address, if different from permanent residence):
	by e-mail:
	to the data box:

Power of attorney

l,	
authorise	
to deal with the Ombudsman on my behalf in re	elation to
In	I have accepted the power of attorney in
on	on
signature of the represented person	signature of the representative
 the person who gives the power of attorney 	 the one who acts on behalf of another on the
	basis of a power of attorney

Please briefly answer the following questions. You may refer to the documents you attach to your submission for details. If you do not have enough space, please continue on the next sheet.

1. Which authority or facility are you complaining about?

You can also write down exactly who you dealt with, or other details about the authority or facility.

2. What went wrong? What are you complaining about?

Briefly describe what happened and when, what the authority or facility did wrong, etc.

3. What do you want to achieve? What do you think is the best solution? Write what you want to happen (for the Ombudsman to do). For example, for the authority to make a decision, to change the decision and how, or to overturn the decision.
4. What have you done yourself so far - how have you defended yourself? How did it turn out?Let us know if you have filed a complaint, appealed a decision or taken legal action. Please also state when you did this and what happened (what was in the reply or decision).
5. A list of the documents you submit to the Ombudsman:
Date: Signature:

We protect your privacy (GDPR)

When you write to the Ombudsman, we will "process" the personal data you have provided in the form so that we can deal with your case under the Act on the Public Defender of Rights. This means that we hold this data on paper and electronically.

We guard your personal data carefully and must not disclose it to anyone without good reason. Your personal data may be disclosed to:

- employees of the Office of the Public Defender of Rights who are involved in the handling of your case,
- authorities or facilities if this is necessary for the handling of your case,
- other public authorities (e.g. law enforcement authorities or courts) if they request it and the Ombudsman agrees (if the Ombudsman is not required by law to disclose the data, he or she will ask you if you wish to do so).

When we receive additional personal data from an authority or facility in the course of dealing with your case, we will also process it.

We will process your personal data until we have resolved your case and then for 7 years. You have the right:

- to access your personal data,
- to have it corrected,
- to have it erased (the "right to be forgotten"),
- to object to its processing,
- to have us restrict its processing,
- to lodge a complaint with a supervisory authority, which is the Office for Personal Data Protection. For more information about its activities, please visit www.uoou.cz.

Do you want to know more about the processing of your personal data? Visit www.ochrance.cz under About us \rightarrow GDPR and personal data protection or contact our data protection officer, JUDr. Veronika Gabrišová (tel. +420 542 542 311, poverenkyne@ochrance.cz).