

PERSONAL DATA CHANGE FORM

(with reference to K.K.I.P. Sdn. Bhd.'s Notice Pursuant to Personal Data Protection Act 2010)

NAME:		
NRIC/PASSPORT NO:		
Request for change of data in K.K.I.P. Sdn. Bhd.'s record: (Please mark ($\sqrt{\ }$) where applicable)		
()	Contact Number
		Latest contact Number:
		() Home:
		() Office:
		() Handphone:
		() Fax:
()	Address
		Latest mailing address:
()	Marital status
		Current status: () Married () Single
()	Other
		Please state:
		ning and returning this form to K.K.I.P. Sdn. Bhd., you agree to K.K.I.P. Sdn. Bhd. updating your nal information data and using your date pursuant to our <u>Privacy Notice.</u>
	ame	*(signature) :