**KOMISIJA ZA ANTIDOPING**

Obrazac zahtjeva za odobrenje izuzetaka za terapijsku upotrebu (TUE)

ANTI-DOPING COMMISSION OF MONTENEGRO

Therapeutic Use Exemption (TUE) Application Form

Popunite sve djelove štampanim slovima, ili elektronski. Sportista treba da popuni djelove 1, 2, 3 i 7, a ljekar treba da popuni djelove 4, 5 i 6. Nečitko napisan i nepotpun zahtjev će biti vraćen, a potom će biti potrebno da se naknadno ispravno popuni i dostavi.

Please complete all sections in capital letters or typing. Athlete to complete sections 1, 2, 3 and 7; Physician to complete sections4, 5 and 6. Illegible or incomplete applications will be returned and will need to be re-submitted in legible and complete form.

1. **Informacije o sportisti/Athlete Information**

Prezime/Last Name: *Click or tap here to enter text.* Ime/First Name(s): *Click or tap here to enter text.*

Žensko/Female:  Muško/Male:  Datum rođenja (d/m/g)/Date of Birth: *Click or tap here to enter text.*

*(dd/mm/yyyy)*

Adresa/Address: *Click or tap here to enter text.*

Grad/City: *Click or tap here to enter text.* Država/Country: *Click or tap here to enter text.*

Poštanski broj/Postcode: *Click or tap here to enter text.*

Telefon (sa međunarodnim kodom)/Telephone: *Click or tap here to enter text.*

*(with International code)* E-mail: *Click or tap here to enter text.*

Sport: *Click or tap here to enter text.* Disciplina/Discipline: *Click or tap here to enter text.*

1. **Prethodni zahtjevi/Previous Applications**

**Da li ste ikada podnijeli TUE zahtjev bilo kojoj antidoping organizaciji za isto medicinsko stanje?/Have you submitted any previous TUE application(s) to any Anti-Doping Organization for the same condition?**

Da/Yes  Ne/No

Za koju supstancu ili metod?/For which substance(s) or method(s)? *Click or tap here to enter text.*

Kome?/To whom? *Click or tap here to enter text.* Kada?/When? *Click or tap here to enter text.*

Odluka/Decision: Odobreno/Approved  Nije odobreno/Not approved

1. **Retroaktivni zahtjevi/Retroactive Applications**

**Da li je ovo retroaktivan zahtjev?/Is this a retroactive application?**

**Da/Yes  Ne/No**

Ako jeste, kog datuma je počeo tretman?/If yes, on what date was the treatment started? *Click or tap here to enter text.*

**Koji od navedenih izuzetaka je razlog zahtjeva? (član 4.1 ISTUE)/Do any of the following exceptions apply? (Article 4.1 of the ISTUE):**

**4.1 (a)** – Bilo je neophodno urgentno liječenje ili liječenje akutnog medicinskog stanja/You required emergency or urgent treatment of a medical condition.

**4.1 (b)** – Nije bilo dovoljno vremena, mogućnosti ili zbog drugih izuzetnih okolnosti koje su spriječile sportistu da traži (ili TUE odbor da razmotri) zahtjev za TUE prije uzimanja uzorka za doping kontrolu/There was insufficient time, opportunity or other exceptional circumstances that prevented you from submitting the TUE application, or having it evaluated, before getting tested.

**4.1 (c)** – Zahtjev prije liječenja nije bio dozvoljen ili obavezan prema važećim antidoping pravilima Komisije/You were not permitted or required to apply in advance for a TUE as per **Anti-Doping Commission of Montenegro** anti-doping rules.

**4.1 (d)** – Sportista ste koji se takmiči na nižem rangu takmičenja koje nije u nadležnosti međunarodn efederacije ili nacionalne antidoping organizacije, i testirani ste/You are a lower-level athlete who is not under the jurisdiction of an International Federation or National Anti-Doping Organization and were tested.

**4.1 (e)** – Doping pozitivni ste, nakon upotrebe van takmičenja supstance koja je zabranjena samo na takmičenju; npr. S9 – glukokortikoidi (pogledati Listu zabranjenih sredstava)/You tested positive after using a substance Out-of-Competition that was only prohibited In-Competition, e.g., S9 glucocorticoids (See [Prohibited List](https://www.wada-ama.org/en/prohibited-list#search-anchor))

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| *Click or tap here to enter text.* |

Molimo da dodatno objasnite (ili priložite dodatnu dokumentaciju)/Please explain (if necessary, attach further documents)

**Drugi retroaktivni zahtjevi (član 4.3 ISTUE)/Other Retroactive Applications (ISTUE Article 4.3)**

U rijetkim i izuzetnim okolnostima, uprkos bilo kojoj drugoj odredbi ISTUE, sportista može da traži odobrenje i da mu se odobri retroaktivan TUE, ako bi s obzirom na svrhu Kodeksa bilo očigledno nepravedno da se ne odobri retroaktivni TUE./In rare and exceptional circumstances notwithstanding any other provision in the ISTUE, an Athlete may apply for and be granted retroactive approval for their TUE if, considering the purpose of the Code, it would be manifestly unfair not to grant a retroactive TUE.

Da biste prijavili TUE prema članu 4.3, priložite kompletno obrazloženje i svu potrebnu prateću dokumentaciju./In order to apply under Article 4.3, please include a full reasoning and attach all necessary supporting documentation.

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| *Click or tap here to enter text.* |

**Ljekar popunjava djelove 4, 5 i 6/Physician to complete sections 4, 5 and 6.**

1. **Zdravstvene informacije (priložite relevantnu medicinsku dokumentaciju)/Medical Information (please attach relevant medical documentation**)

Dijagnoza (molimo da koristite međunarodnu klasifikaciju bolesti Svjetske zdravstvene organizacije WHO ICD 11)/Diagnosis (Please use the WHO ICD 11 classification if possible):

|  |
| --- |
| *Click or tap here to enter text.* |

1. **Detalji o liječenju/Medication Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Zabranjene supstance/metode:  generički naziv  /Prohibited Substance(s)/Method(s)  Generic name(s) | Doza/Dosage | Način primjene/Route of Administration | Učestalost/Frequency | Trajanje primjene/Duration of Treatment |
| 1. *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| 2. *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| 3. *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| 4. *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |
| 5. *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* | *Click or tap here to enter text.* |

*Dokazi koji potvrđuju dijagnozu moraju da budu prikupljeni i proslijeđeni uz ovaj zahtjev. Zdravstvene informacije moraju da obuhvate opsežnu medicinsku istoriju bolesti i nalaze/rezultate određenih ispitivanja, laboratorijskih analiza i dijagnostičkih procedura. Fotokopije originalnih dokumenata ili izvještaja takođe treba da budu poslate uz ovaj zahtjev. Dodatno, kratak sažetak koji podrazumijeva dijagnozu, ključne nalaze kliničkih ispitivanja, dijagnostičke testove i plan liječenja, bio bi od velike koristi.*

*Ako postoji lijek koji nije zabranjen a može da se koristi za liječenje bolesti, treba navesti razloge i opravdanje za prijavu TUE i korišćenje zabranjene supstance.*

*Svjetska antidoping agencija raspolaže sa velikim brojem TUE lista koje pomažu sportistima i ljekarima u pripremi kompletnih i temeljnih TUE zahtjeva. Njima se može pristupiti unošenjem termina za pretragu „Checklist“ na WADA internet stranici:* [*https://www.wada-ama.org*](https://www.wada-ama.org)*.*

*/Evidence confirming the diagnosis must be attached and forwarded with this application. The medical information must include a comprehensive medical history and the results of all relevant examinations, laboratory investigations and imaging studies.* *Copies of the original reports or letters should be included when possible. In addition, a short summary that includes the diagnosis, key elements of the clinical exams, medical tests and the treatment plan would be helpful.*

*If a permitted medication can be used to treat the medical condition, please provide justification for the therapeutic use exemption for the prohibited medication.*

*WADA maintains a series of TUE Checklists to assist athletes and physicians in the preparation of complete and thorough TUE applications. These can be accessed by entering the search term “Checklist” on the WADA website:* [*https://www.wada-ama.org*](https://www.wada-ama.org)*.*

1. **izjava ljekara/Medical Practitioner’s Declaration**

Potvrđujem da su podaci u djelovima 4, 5 i 6 tačni. Prihvatam i slažem se da antidoping organizacije mogu da koriste moje lične podatke da bi me kontaktirale u vezi sa ovom prijavom TUE, radi provjere profesionalnog pristupa u vezi sa TUE postupkom ili u vezi sa istragom zbog povrede antidoping pravila. Prihvatam i slažem se da će moji lični podaci biti unijeti u Antidoping administrativni sistem i sistem upravljanja (ADAMS) u ove svrhe (pogledati [ADAMS Privacy Policy](https://adams-help.wada-ama.org/hc/en-us/categories/360001964873-ADAMS-Privacy-and-Security) za više detalja)./I certify that the information in sections 4, 5 and 6 is accurate. I acknowledge and agree that my personal information may be used by Anti-Doping Organization(s) (ADO) to contact me regarding this TUE application, to verify the professional assessment in connection with the TUE process, or in connection with Anti-Doping Rule Violation investigations or proceedings. I further acknowledge and agree that my personal information will be uploaded to the Anti-Doping Administration and Management System (ADAMS) for these purposes (see the [ADAMS Privacy Policy](https://adams-help.wada-ama.org/hc/en-us/categories/360001964873-ADAMS-Privacy-and-Security) for more details).

Ime i prezime/Name: *Click or tap here to enter text.*

Medicinska specijalnost/Medical specialty: *Click or tap here to enter text.*

Broj licence/License number: *Click or tap here to enter text.* Komora koja je izdala licencu/License body:

*Click or tap here to enter text.*

Adresa/Address: *Click or tap here to enter text.*

Grad/City: *Click or tap here to enter text.* Država/Country: *Click or tap here to enter text.*

Poštanski broj/Postcode: *Click or tap here to enter text.*

Telefon (sa međunarodnim kodom)/Telephone: *Click or tap here to enter text.* Fax: *Click or tap here to enter text.*

*(with International code)*

E-mail: *Click or tap here to enter text.*

Potpis ljekara/Signature of Medical Practitioner: *Click or tap here to enter text.* Datum/Date: *Click or tap to enter a date.*

1. **Izjava sportiste/Athlete’s Declaration**

Ja, *Click or tap here to enter text.*, tvrdim da su informacije u djelovima 1, 2, 3 i 7 tačne i kompletne. Ovlašćujem svog ljekara da izda medicinske informacije i nalaze koje smatra potrebnim za procjenu osnovanosti mog zahtjeva za TUE sljedećim primaocima: antidoping organizaciji (ADO) odgovornoj za donošenje odluke o odobravanju, odbijanju ili priznavanju TUE, Svjetskoj antidoping agenciji (WADA) koja je odgovorna da osigura da su odluke koje donesu ADO u saglasnosti sa Međunarodnim standardom za odobravanje TUE; ljekarima koji su članovi relevantnih TUE Odbora ADO i WADA i koji će možda morati da pregledaju moj zahtjev u skladu sa Svjetskim antidoping kodeksom i međunarodnim standardima; i, ako je potrebno da preispitaju moj zahtjev, kao i drugim nezavisnim, medicinskim, naučnim ili pravnim stručnjacima.

Ovlašćujem Komisiju za antidoping da proslijedi moj kompletan zahtjev za TUE, uključujući prateće medicinske informacije i izvještaje, drugim antidoping organizacijama i WADA zbog razloga gore opisanih, i razumijem da će ovi primaoci možda morati da proslijede moj kompletan zahtjev svojim članovima TUE Odbora i relevantnim stručnjacima kako bi analizirali moj zahtjev.

Pročitao sam i razumio TUE obavještenje o privatnosti u kojem se objašnjava kako će se obrađivati moji lični podaci u vezi sa mojim zahtjevom za TUE i prihvatam njegove uslove.

I, *Click or tap here to enter text.*, certify that the information set out at sections 1, 2, 3 and 7 is accurate and complete.

I authorize my physician(s) to release the medical information and records that they deem necessary to evaluate the merits of my TUE application to the following recipients: the Anti-Doping Organization(s) (ADO) responsible for making a decision to grant, reject, or recognize my TUE; the World Anti-Doping Agency (WADA), who is responsible for ensuring determinations made by ADOs respect the ISTUE; the physicians who are members of relevant ADO(s) and WADA TUE Committees (TUECs) who may need to review my application in accordance with the World Anti-Doping Code and International Standards; and, if needed to assess my application, other independent medical, scientific or legal experts.

I further authorize Anti-Doping Commission of Montenegro to release my complete TUE application, including supporting medical information and records, to other ADO(s) and WADA for the reasons described above, and I understand that these recipients may also need to provide my complete application to their TUEC members and relevant experts to assess my application.

I have read and understood the TUE Privacy Notice (below) explaining how my personal information will be processed in connection with my TUE application, and I accept its terms.

Potpis sportiste/Athlete’s signature: *Click or tap here to enter text.* Datum/Date: *Click or tap to enter a date.*

Potpis roditelja/staratelja/

Parent’s/Guardian’s signature: *Click or tap here to enter text.* Datum/Date: *Click or tap to enter a date.*

(ako je sportista maloljetan ili ima posebne potrebe koje ga sprječavaju da potpiše ovaj formular, roditelj ili staratelj će potpisati ovaj formular)/(If the Athlete is a Minor or has an impairment preventing them from signing this form, a parent or guardian shall sign on behalf of the Athlet*e*)

**Obavještenje o privatnosti vezano za TUE/TUE Privacy Notice**

Ovo obavještenje opisuje obradu ličnih podataka do koje će doći u vezi sa Vašim podnošenjem TUE zahtjeva.

**VRSTE LIČNIH PODATAKA**

* Informacije koje ste dali Vi ili Vaš ljekar(i) na obrascu za TUE zahtjev (uključujući Vaše ime, datum rođenja, kontakt podatke, sport i disciplinu, dijagnozu, ljekove i terapiju relevantnu za Vaš zahtjev)
* Dodatni medicinski podaci i izvještaji koje ste obezbijedili Vi ili Vaš ljekar(i)
* Procjene i odluke o Vašem zahtjevu za TUE od strane ADO (uključujući WADA) i njihovih odbora za TUE i drugih stručnjaka za TUE, uključujući komunikaciju sa Vama i Vašim ljekarima, relevantnim ADO ili pomoćnim osobljem u vezi sa Vašim zahtjevom

**SVRHA I UPOTREBA**

Vaše lične informacije koristiće se za obradu i procjenu osnovanosti Vašeg TUE zahtjeva u skladu sa Međunarodnim standardom za odobravanje izuzeća za terapijsku upotrebu. U nekim slučajevima, mogli bi da se koriste u druge svrhe u skladu sa Svjetskim antidoping kodeksom, međunarodnim standardima i antidoping pravilima ADO koje imaju ovlašćenje da Vas testiraju. Ovo uključuje:

* upravljanje rezultatima, u slučaju nepovoljnog ili atipičnog nalaza Vašeg uzorka ili biološkog pasoša sportiste; i
* u rijetkim slučajevima, istrage ili srodnih postupaka u kontekstu sumnje na povredu antidoping pravila.

**PRIMAOCI INFORMACIJA**

Vaši lični podaci, uključujući Vaše medicinske ili zdravstvene informacije i izvještaje, mogu se proslijediti sljedećim osobama:

* ADO odgovorne za donošenje odluke o odobravanju, odbijanju ili priznavanju Vašeg TUE, kao i njihove delegirane treće strane (ako ih ima). Odluka o odobravanju ili odbijanju Vašeg zahtjeva za TUE biće takođe dostupna ADO koje imaju nad Vama nadležnost za testiranje i/ili upravljanje rezultatima;
* ovlašćeno osoblje WADA;
* članovi TUE odbora svake relevantne ADO i WADA; i
* ostali nezavisni medicinski, naučni ili pravni stručnjaci, ako je potrebno.

Imajte na umu da će zbog osjetljivosti informacija vezanih za TUE samo ograničeni broj zaposlenih u ADO i WADA dobiti pristup Vašem zahtjevu. ADO (uključujući WADA) moraju da rukuju Vašim ličnim podacima u skladu sa Međunarodnim standardom za zaštitu privatnosti i ličnih podataka. Takođe se možete obratiti Komisiji za antidoping kako biste dobili detalje o obradi Vašeg zahtjeva.

Vaši privatni podaci će takođe biti unijeti u ADAMS od strane ADO koja obrađuje TUE tako da će druge ADO i WADA moći da pristupe po potrebi u gore opisane svrhe. ADAMS je baziran u Kanadi, a njime upravlja WADA. Za detalje o ADAMS i kako će WADA obraditi Vaše lične podatke, pogledajte ADAMS politiku privatnosti ([ADAMS Privacy Policy](https://adams-help.wada-ama.org/hc/en-us/categories/360001964873-ADAMS-Privacy-and-Security)).

This Notice describes the personal information processing that will occur in connection with your submission of a TUE Application.

**TYPES OF PERSONAL INFORMATION (PI)**

* The information provided by you or your physician(s) on the TUE Application Form (including your name, date of birth, contact details, sport and discipline, the diagnosis, medication, and treatment relevant to your application);
* Supporting medical information and records provided by you or your physician(s); and
* Assessments and decisions on your TUE application by ADOs (including WADA) and their TUE Committees and other TUE experts, including communications with you and your physician(s), relevant ADOs or support personnel regarding your application.

**PURPOSES & USE**

Your PI will be used in order to process and evaluate the merits of your TUE application in accordance with the International Standard for Therapeutic Use Exemptions. In some instances, it could be used for other purposes in accordance with the World Anti-Doping Code (Code), the International Standards, and the anti-doping rules of ADOs with authority to test you. This includes:

* Results management, in the event of an adverse or atypical finding based on your sample(s) or the Athlete Biological Passport; and
* In rare cases, investigations, or related procedures in the context of a suspected Anti-Doping Rule Violation (ADRV).

**TYPES OF RECIPIENTS**

Your PI, including your medical or health information and records, may be shared with the following:

* ADO(s) responsible for making a decision to grant, reject, or recognize your TUE, as well as their delegated third parties (if any). The decision to grant or deny your TUE application will also be made available to ADOs with testing authority and/or results management authority over you;
* WADA authorized staff;
* Members of the TUE Committees (TUECs) of each relevant ADO and WADA; and
* Other independent medical, scientific or legal experts, if needed.

Note that due to the sensitivity of TUE information, only a limited number of ADO and WADA staff will receive access to your application. ADOs (including WADA) must handle your PI in accordance with the International Standard for the Protection of Privacy and Personal Information (ISPPPI). You may also consult the ADO to which you submit your TUE application to obtain more details about the processing of your PI.

Your PI will also be uploaded to ADAMS by the ADO who receives your application so that it may be accessed by other ADOs and WADA as necessary for the purposes described above. ADAMS is hosted in Canada and is operated and managed by WADA. For details about ADAMS, and how WADA will process your PI, consult the ADAMS Privacy Policy ([ADAMS Privacy Policy](https://adams-help.wada-ama.org/hc/en-us/categories/360001964873-ADAMS-Privacy-and-Security)).

**POŠTENA I ZAKONSKA OBRADA**

Kada potpišete Izjavu sportiste, potvrđujete da ste pročitali i razumjeli ovo obavještenje o privatnosti podataka vezanih za TUE. Tamo gdje je to prikladno i dozvoljeno prema važećim zakonima, ADO i gore pomenute strane mogu takođe smatrati da ovaj potpis potvrđuje Vašu izričitu saglasnost za obradu Vaših ličnih podataka za svrhe opisane u ovom obavještenju, kao što su važni javni interesi u službi antidopinga, potreba za ispunjavanjem ugovornih obaveza koje Vam duguju, potreba da se obezbijedi poštovanje zakonske obaveze ili obaveznog pravnog postupka ili potreba da se ispune legitimni interesi povezani sa njihovim aktivnostima.

**PRAVA**

Imate prava u pogledu ličnih podataka prema Međunarodnim standardima za zaštitu privatnosti i ličnih podataka uključujući pravo na kopiju Vaših ličnih podataka i na njihovo ispravljanje, blokiranje ili brisanje u određenim okolnostima. Možda imate dodatna prava prema važećim zakonima, poput prava na ulaganje žalbe osobi nadležnoj za zaštitu podatka u Vašoj zemlji.

Tamo gdje se obrada Vaših ličnih podataka zasniva na Vašoj saglasnosti, možete da opozovete svoju saglasnost u bilo kom trenutku, uključujući ovlašćenje ljekaru za objavljivanje medicinskih podataka kako je opisano u Izjavi sportiste. Da biste to uradili, morate o svojoj odluci obavijestiti svoju ADO i svog ljekara. Ako povučete pristanak ili se usprotivite obradi ličnih podataka opisanoj u ovom obavještenju, Vaš TUE će vjerovatno biti odbijen jer ADO neće moći pravilno da ga obradi u skladu sa Kodeksom i međunarodnim standardima.

U rijetkim slučajevima, možda će biti potrebno da ADO nastavi da obrađuje Vaše lične podatke kako bi ispunila obaveze prema Kodeksu i međunarodnim standardima, uprkos Vašem prigovoru na takvu obradu ili povlačenju saglasnosti (ako je primjenljivo). To uključuje obradu za postupke povezane sa povredom antidoping pravila, kao i obradu radi uspostavljanja, primjene ili odbrane od pravnih zahtjeva koji uključuju Vas, WADA i/ili ADO.

**ZAŠTITA**

Sa svim informacijama sadržanim u zahtjevu za TUE, uključujući prateće medicinske nalaze i izvještaje, kao i sve druge informacije povezane sa procjenom zahtjeva za odobrenje TUE mora se postupati u skladu sa principima stroge medicinske povjerljivosti. Ljekari koji su članovi TUE Odbora i svi drugi stručnjaci koji su konsultovani moraju biti predmet sporazuma o povjerljivosti.

Prema Međunarodnom standardu za zaštitu privatnosti i ličnih podataka, osoblje ADO takođe mora da potpiše sporazume o povjerljivosti, a ADO mora da primijeni jake mjere privatnosti i bezbjednosti kako bi zaštitila svoje lične podatke. Međunarodni standard za zaštitu privatnosti i ličnih podataka zahtijeva od ADO da primijeni viši nivo zaštite informacija u vezi obrade TUE, zbog osjetljivosti ovih informacija. Informacije o bezbjednosti u ADAMS možete pronaći kao odgovor na pitanje kako su Vaše informacije zaštićene u ADAMS? u [ADAMS Privacy and Security FAQs](https://adams-help.wada-ama.org/hc/en-us/categories/360001964873-ADAMS-Privacy-and-Security).

**ZADRŽAVANJE**

ADO će zadržati Vaše lične podatke (uključujući WADA) tokom perioda zadržavanja opisanih u Aneksu A Međunarodnog standarda za zaštitu privatnosti i ličnih podataka. TUE potvrde ili odluke o odbijanju zadržavaju se 10 godina. Obrasci zahtjeva za TUE i dopunske medicinske informacije čuvaće se 12 mjeseci od isteka TUE. Nepotpune prijave TUE zadržavaće se 12 mjeseci.

**KONTAKT**

Za sva pitanja ili nedoumice u vezi sa obradom Vaših ličnih podataka kontaktirajte Komisiju za antidoping na mejl adresu [info@anti-doping.me](mailto:info@anti-doping.me). Da biste kontaktirali WADA, koristite [privacy@wada-ama.org](mailto:privacy@wada-ama.org).

**FAIR & LAWFUL PROCESSING**

When you sign the Athlete Declaration, you are confirming that you have read and understood this TUE Privacy Notice. Where appropriate and permitted by applicable law, ADOs and other parties mentioned above may also consider that this signature confirms your express consent to the PI processing described in this Notice. Alternatively, ADOs and these other parties may rely upon other grounds recognized in law to process your PI for the purposes described in this Notice, such as the important public interests served by anti-doping, the need to fulfill contractual obligations owed to you, the need to ensure compliance with a legal obligation or a compulsory legal process, or the need to fulfill legitimate interests associated with their activities, according to the relevant legal grounds specific to Montenegro.

**RIGHTS**

You have rights with respect to your PI under the ISPPPI, including the right to a copy of your PI and to have your PI corrected, blocked or deleted in certain circumstances. You may have additional rights under applicable laws, such as the right to lodge a complaint with a data privacy regulator in your country.

Where the processing of your PI is based on your consent, you can revoke your consent at any time, including the authorization to your physician to release medical information as described in the Athlete Declaration. To do so, you must notify your ADO and your physician(s) of your decision. If you withdraw your consent or object to the PI processing described in this Notice, your TUE will likely be rejected as ADOs will be unable to properly assess it in accordance with the Code and International Standards.

In rare cases, it may also be necessary for ADOs to continue to process your PI to fulfill obligations under the Code and the International Standards, despite your objection to such processing or withdrawal of consent (where applicable). This includes processing for investigations or proceedings related to ADRV, as well as processing to establish, exercise or defend against legal claims involving you, WADA and/or an ADO.

**SAFEGUARDS**

All the information contained in a TUE application, including the supporting medical information and records, and any other information related to the evaluation of a TUE request must be handled in accordance with the principles of strict medical confidentiality. Physicians who are members of a TUE Committee and any other experts consulted must be subject to confidentiality agreements.

Under the ISPPPI, ADO staff must also sign confidentiality agreements, and ADOs must implement strong privacy and security measures to protect your PI. The ISPPPI requires ADOs to apply higher levels of security to TUE information, because of the sensitivity of this information. You can find information about security in ADAMS by consulting the response to [How is your information protected in ADAMS?](https://adams-help.wada-ama.org/hc/en-us/articles/360010175840-How-is-your-information-protected-in-ADAMS-) in our [ADAMS Privacy and Security FAQs](https://adams-help.wada-ama.org/hc/en-us/categories/360001964873-ADAMS-Privacy-and-Security).

**RETENTION**

Your PI will be retained by ADOs (including WADA) for the retention periods described in Annex A of the ISPPPI. TUE certificates or rejection decisions will be retained for 10 years. TUE application forms and supplementary medical information will be retained for 12 months from the expiry of the TUE. Incomplete TUE applications will be retained for 12 months.

**CONTACT**

Consult Anti-Doping Commission of Montenegroat [info@anti-doping.me](mailto:info@anti-doping.me)for questions or concerns about the processing of your PI. To contact WADA, use [privacy@wada-ama.org](mailto:privacy@wada-ama.org).

Molimo Vas da mejl o namjeri da podnesete zahtjev za TUE pošaljete Komisiji za antidoping na mejl adresu [info@anti-doping.me](mailto:info@anti-doping.me) (zadržavajući svoju kopiju izvještaja), nakon čega ćete dobiti uputstvo o bezbjednom slanju podataka.

/Please submit the completed form to [info@anti-doping.me](mailto:info@anti-doping.me) (keeping a copy for your records).