

INFORMED CONSENT/AUTHORISATION FOR DATA PROCESSING AND REFERRAL¹

I _____ Applicant's/Guardian name _____ understand that the purpose of the data processing and information sharing is to seek support for my needs (or the child applicant.....). The case officer has clearly explained the procedure of the assessment to me and has presented the exact information that is to be shared.

I understand that my personal data is processed by [insert the respective national authority]² in order to assess my needs and to facilitate access to adequate support, in view of the particular circumstances of my situation.

I understand that releasing this information means that a person from [insert the respective national authority] or from [insert recipients/service provider] may come to talk to me. At any point, I have the right to change my mind about sharing information with the designated agency or service provider.

I hereby authorise [insert the respective national authority] and any authorised person or entity acting on behalf of [insert the respective national authority] to process my personal data for the purpose mentioned above.

I am aware and agree that my personal data will be processed by [insert the respective national authority] and will have to be shared with the service provider in order to receive appropriate support according to the particular circumstances of my case.

[Insert the respective national authority] and [insert recipients/service provider] will not disclose my personal data to any other third party outside the purpose mentioned above without my consent.

I confirm that:

- a. I have been informed about the specified purpose(s) for which my personal data will be collected, used and disclosed, as described above.
- b. I understand that I may exercise certain rights as data subject, including the right to access and rectify my personal data on request by contacting [insert the respective national authority's contact details/email].
- c. Any information obtained will be treated with the utmost confidentiality and in line with the applicable data protection rules.
- d. I understand the contents of this informed consent form after being provided with sufficient information on how my personal data will be processed by [insert the respective national authority].

By signing I authorise this exchange of information, including personal data concerning me (or the child applicant...).

Applicants' signature:

¹ This form is a template developed by the EUAA as part of the documentation accompanying the Special Needs and Vulnerability Assessment Tool. As such, its content is not binding on the respective national authorities and may therefore be adjusted accordingly. The responsibility for the preparation and the content of the final version of the form shall lie with the respective national authority.

² For the purpose of this tool, the collection and processing of personal data is performed under the responsibility of the respective national authority that makes use of the tool.

Guardian/representative's signature:

Date:

Case officer Name and Surname:

Annex: Privacy Statement/Data Protection Notice on the Special Needs and Vulnerability Assessment Tool³

³ This document needs to be prepared by the respective national authority and not to be confused with the SNVA Privacy Notice contained in the tool. It is very important that this document is provided before this consent form is completed by the applicant, as the information provided through this form covers only some aspects of the information that is normally provided through a Privacy Statement or Data Protection notice.