# Faversham Assistance Centre (FACE) Data Protection Act - Client Consent Form



In order for us to help you with your enquiry we may need to record details of your case. These details may contain your personal and sensitive data.

To comply with the Data Protection Act (2018) we must tell you how we use this data and ask for your permission. By signing this form you are providing your permission for us to process your data for the purposes below. For further information please the section titled 'Information on Terms Used in this Form'.

#### Permission to store your data

We are required by law to ask for your permission to record the details of your case. These details may contain your personal and sensitive data. The record of your case will be stored in a shared electronic case management system accessed by members of FACE. Paper copies of your data may also be stored securely by FACE. For the purposes of the Data Protection Act the members of FACE are Data Controllers.

I give permission for FACE to contact me by: Phone

Letter

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	give my	/ consent to	FACE recordin	g sensitive	nersonal	Information	anout me
• •		consent to	THEE TECOTOR	Bachard	personal	mornation	aboutine

Title:	Miss / Mrs / Ms / Mr / Other
First Name:	
Surname:	
Address:	
Postcode:	
Landline:	
Mobile:	
Email:	
Signature:	Date:

Please complete these sections **as fully as possible**. It helps us to record accurate data, enabling us to assist you with your query. It also provides data to demonstrate to our existing and potential funders the needs of the community.

When returning your form please include a recent utility bill dated within the last 3 months (it will be returned to you). This will be used as proof of ID/address when applying for our services. Please contact the office if you need to discuss this.

Date of Birth	Gender: Male	Female	
Marital StatusSingleMarriedSeperatedDivorced	Cohabiting Civil Partne Widowed Other	rship	
Household Type Single Single with dependent children Single with non-dependent children Other Adults only	Couple Couple with dependent Couple with non-dependent Other with dependent c	dent children	
Housing Type   Own Outright Private Tenant   Housing Association Council Tenant   Name of Housing Association			
	n Health Condition	Other	
Type of Disability/Condition   Long-Term Health Condition   Visual Impairment   Cognitive Impairment   Physical Impairment   Other Disability	Mental Health Hearing Impairment Multiple Impairment Learning Difficulty	Continued Overleaf	

#### Occupation

Employed more than 30hrs per week Employed less than 30hrs per week Permanently sick/disabled

Retired	
Volunteer	
Self Employed	

Datirad

Other

## Your Household

Please give details of all occupants (relationship & age)

### Donations

Our services for labour are completed on a donation only basis to the elderly or disabled people who are on benefits or low income with no one else to turn to.

We can only continue to help people through generosity or their donations.

## The suggested donation is £10 per hour but please give as much as you are able.

#### Thank you for completing this form.

#### We will assess the information you have provided and contact you shortly.

#### Information on Terms Used in this Form

#### What is personal and sensitive data?

Personal data is data which can be used to identify you. This may include your name, date of birth, address, telephone number etc.

Sensitive data is information related to any of the following: racial or ethnic origin, political opinions, religious beliefs, trade union membership, health, sexuality or sex life, offences and/or convictions.

#### Where will you store my data?

The record of your case will be stored in a shared electronic case management system accessed by members of FACE. Your information may also be stored in a paper file held securely by FACE

#### What is a Data Controller?

A Data Controller is someone who is responsible for your data and who must make sure that your data is processed according to the law. For example they are responsible for making sure that the information held about you is accurate and that it is kept secure.

#### Can I withhold my consent?

Yes we will not record your information unless you provide your consent. We will not share your information with anyone else without your consent, unless required to do so by law.

#### **Data Protection Act**

In order for us to establish your eligibility for our services we may need to record details of your case. These details may contain your personal and sensitive data. To comply with the Data Protection Act (2018) we must tell you how we use this data and ask for your permission. By signing this form you are providing your permission for us to process your data for the purposes required.

Office Use Only			
Date Received			
Date Added to the service	e list		Date Removed from service list (If applicable)
Faversham	Assistance C	Centre (FACE)	, The Old Fire Station, Crescent Road, Faversham, ME13 7GU
	Mo	obile: 07483	150 330 Email: favassistants@gmail.com

**Registered Charity No: 1172770**