

Community Sponsorship Scheme

Data Sharing Consent Form

<Name of Lead Sponsor> is required to hold certain information about you as part of our commitment to help you resettle in the UK.

We will hold that information safely and securely. We will only share the information necessary for our staff and volunteers to support your family as agreed, or to help protect you or others from harm.

If you would like any of our staff or volunteers to share information about your family for any other reason, we would ask you to confirm your consent by signing this form.

For example, until you are confident to do so you might ask the group supporting you to speak on your behalf to your GP practice, your children's school, the local Job Centre or your Housing Provider.

Please discuss all of this with your group and agree which organisations your group can discuss or share information with about your family.

Then please complete the table below and sign and date the form to confirm your consent:

| Name of Organisation | Contact Name | Contact Number |
|----------------------|--------------|----------------|
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By signing this form, I consent to **<Name of Lead Sponsor>** staff and volunteers sharing personal information about my family with the above organisations at any time.

Name:

Signed: Date:

Where this form has not yet been signed by an adult family member, but personal data consent has been fully explained and they verbally consent to the sharing of personal information in accordance with this form, a **<Name of Lead Sponsor>** staff member or volunteer should complete, sign and date the form below.

A copy of the completed form should be sent to the resettled family for their further signature and return.

I have today discussed this Data Sharing Consent Form with **<Name of family member>** who has verbally requested and given consent for **<Name of Lead Sponsor>** staff and volunteers to share personal information about my family with the above organisations at any time.

Name:

Signed: Date: