Form 4

 APPROVED BY

 Klaipėda University

 Personal data management rules

 Appendix 1

**PERSONAL DATA CONCENT FORM**

**\_\_\_\_\_\_\_\_\_\_\_\_**

(date)

**I**, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name, surname, position)

**hereby confirm** being familiar with the data protection and management rules of the Klaipėda University and informed on my personal data management by data administrator Klaipėdos universitetas, legal body number 211951150, address Herkaus Manto 84, LT – 92294 Klaipėda.

**I give explicit consent** to collection, processing and storage of my personal data in agreement with thepersonal data protection and management rules of the Klaipėda University.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (Name, surname) |  |  |  |  | (Signature) |