

CONSENT

I agree that

[]-----, Address -----

can, as part of this project, store and use all the information, which is necessary for my linguistic, academic, professional and social support.

This information will strictly be requested from me. A support and development plan, as well as an electronic file, will be compiled from this information, so that I can be supported in the best way possible. Protectable data about my health and ethnic origin (§ 3 para. 9 German Data Protection Act) will also be asked for. If a third party is to collect data about me, I will be asked in advance for renewed consent. I will be able to look at my case file at [] at any time, or to be given an extract from it.

The information, which I disclose about myself, will be treated in confidence. [] is, however, dependent on the support of IT companies, which, for example, operate the hardware and software of the electronic file. These IT companies may only act in accordance with the instructions of [] and are, likewise, obligated to confidentiality. For this support, however, I must release the members of staff advising me from their **professional secrecy**, which I hereby do.

The project, in which I am taking part, is financially supported. The data must, therefore, be statistically evaluated. This is carried out by the relevant institutes – but only with anonymous data: my name, my address and my date of birth are deleted for this!

I can withdraw this consent at any time and I also do not have to hand it over. If I withdraw my consent, however, I can no longer be supported by the project.

Independently of the consent described above, I must make a further decision before taking part in the project.

The project, in which I am taking part, is one of several projects of the STRENGTHEN YOUTH (JUGEND STÄRKEN) initiative. In order for the

evaluation to be comprehensive, part of the data is to be forwarded to the Youth Welfare Service – in doing so, the data will be defamiliarised in such a way, and summarized with other data, that the Youth Welfare Service cannot detect who it is relating to. The data will help the Youth Welfare Service to be able to plan better and improve projects such as the one in which I am supported. And it also helps the projects to show the Youth Welfare Service, that they are doing good work.

O I agree that, in addition, defamiliarised data can be passed on to the Youth Welfare Service. I must also release the members of staff advising me, from their **professional secrecy**, which I hereby do. I must not hand over this consent and can also withdraw it at any time.

O I do not agree to defamiliarised data being passed on to the Youth Welfare Service. The refusal of consent does not have any negative effects.

**I agree that [] and, if necessary, the Youth Welfare Service
(depending on what I decide) can store and use the data as
described.**

First name:-----

Surname:-----

Street:-----

Post Code/Town or City-----

Town/City, Date

Signature of Participant

Town/City, Date

if necessary, Legal Representative

Town/City, Date

Signature of Case Manager