

Consent Form for Scholarship Applicants and Beneficiaries

The undersigned,		
Please read the privacy notice thoroughly and tick the checkboxes only, if you understood how REF		
processes your personal data and you agree with it!		
By signing this document, I hereby consent to the following processing activities:		
 I consent REF to collect, store data to manage my registered account as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes □ No □ 		
Please note that you may revoke consent, but your application is no longer valid due to revocation of consent, thus REF will not take it into account during the application procedure.		
 I consent REF to process application form data as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes □ No □ 		
Please note that you may revoke consent, but your application is no longer valid due to revocation of consent, thus REF will not take it into account during the application procedure.		
 I consent REF to create shortlist of applicants as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes □ No □ 		

Office phone: +36 1 235 8030 Office fax: +36 1 235 8031



Please note that you may revoke consent, but your application is no longer valid due to revocation of consent, thus REF will not take it into account during the application procedure.

•	I consent REF to check my university enrolment as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes \Box No \Box
•	I consent REF to inform me about results from scholarship competition of my application as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes \Box No \Box
•	I consent REF to conduct online statistical research as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes \Box No \Box
•	I consent REF to inform me about new scholarship opportunities as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes \Box No \Box
•	I consent REF to store and use data shared by participants in Alumni and Beneficiary Network as described in Section "Processing related to provide scholarships" of the Privacy Notice. Yes \Box No \Box
•	I consent REF to process my personal data as described in Section "Processing activities related to researches conducted by REF" Subsection "collect, store, process and erase data to conduct research about beneficiaries of scholarships and beneficiaries of grants" of the Privacy Notice. Yes \Box No \Box

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 I consent REF to store and use my personal data as described in Section "Processing related to communication activities" Subsection "editing and managing REF's Website" of the Privacy Notice. Yes □ No □
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In addition, I acknowledge and agree that if I am selected for Scholarship beneficiary, I may be invited from REF to participate in interviews and various media initiatives, that may also include photo shooting and video recording. I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.
I also understand that Roma Education Fund is not responsible for any expense or liability incurred as a result of my participation in recording, including medical expenses due to any sickness or injury incurred as a result.
I represent that I am at least 16 years of age, have read and understand the foregoing statement, and I am competent to execute this agreement.
Place:
Date:
applicant/ beneficiary (signature)

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