**CONSENT FOR THE COLLECTION AND PROCESSING OF**

**SENSITIVE PERSONAL DATA FROM THE EUROPEAN UNION**

1) Pursuant to the European Union General Data Protection Regulation (EU GDPR), the University of Georgia (the “University”), in its capacity as a data controller under the EU GDPR, must obtain your explicit, affirmative consent before it can collect or process any sensitive personal data for a lawful basis, including, but not limited to, employment, admission and enrollment, study abroad, internship abroad, online education, etc. For information on how the University of Georgia uses data, please review the [[Privacy Policy]] [[insert link]]

2) Sensitive personal data includes racial or ethnic origin; political opinions; religious or philosophical beliefs; trade union membership; genetic, biometric data; health data; or data concerning a person’s sex life or sexual orientation.

3) Any sensitive personal data that is collected from you will be for the sole purpose of **[choose the correct purpose from bullet list and delete the rest]**

* [[Application for admission to the University of Georgia that is sent from the EU]]

[[Planning and organization of study abroad program in the EU, and performance of academic services in connection therewith, at \_\_\_\_\_\_\_\_\_\_\_ institution]]

[[Planning and organization of, and enrollment and participation from an EU location in, a distance learning study program at the University of Georgia]]

[[An employment relationship with the University of Georgia taking place in the EU at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ institution]]

[[Application for an employment relationship with the University of Georgia that is sent from the EU]]

[[Participation in a research study]] [[specify research study title]]

OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please specify)

and is necessary for that purpose. This may include processing the sensitive personal data as required to execute contractual obligations in connection with the previously described purpose and compliance with applicable laws, to execute the obligations to you concerning your **[choose the correct item from bullet list and delete the rest]**

* [[Enrollment as a student at the University of Georgia]]
* [[enrollment in a study abroad program, including course attendance and other academic requirements, dietary requirements and health and safety information]].
* [[enrollment and/or participation from an EU location in a distance learning study program at the University of Georgia, including course attendance and other academic requirements]].
* [[employment in the EU, including payroll management, salary payments, tax compliance and health and safety information]].
* [[employment at the University of Georgia, including payroll management, salary payments, tax implications and health information]].
* [[participation in a research study]] [[specify research study title]]

OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please specify)

Sensitive personal data regarding judicial measures which may have been provided to the University of Georgia by public bodies will be processed only for the purposes relating to a health or safety emergency and complying with any applicable EU law.

4) Sensitive personal data will be handled and processed only by the persons who are responsible for the necessary activities for the purpose above, and will be transmitted from the EU to the University of Georgia’s main campus in Athens, Georgia.

5) Refusal of consent may make it impossible for the University to carry out its necessary activities for the purpose above, and may preclude the University’s ability to provide requested [[educational services]] [[employment]] [[participation in a research study]] to you.

6) You have the right to withdraw your consent to the collection and processing of sensitive personal data. If you would like to withdraw consent, please contact [[insert information for responsible person in University Unit]]:

NAME:

UNIVERSITY OF GEORGIA UNIT:

PHONE NUMBER:

EMAIL:

7) The University is committed to ensuring the security of your information. We have put in place reasonable physical, technical, and administrative safeguards designed to prevent unauthorized access to your information.

8) The University has an EU GDPR Compliance Policy which includes your individual rights concerning your data. Please see the EU GDPR Compliance Policy here: [Insert link to policy]

**Having read this notice, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned,**

**[Print Full Name Here]**

**hereby:**

**🞏 gives consent 🞏 does not give consent**

**for the use of his/her sensitive personal data, and the transfer of sensitive personal data overseas, for the purpose outlined in this notice.**

**Date [Month/Day/Year]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I also hereby waive my right to privacy of confidentiality regarding \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (EU Institution hosting student/employee) reporting to the appropriate authorities at the University of Georgia if I am seriously ill, suffer an injury, am the victim or perpetrator of harassment, whether on or off campus, am the victim of the perpetrator of sexual or gender-based misconduct and/or of criminal behavior, whether on or off campus, and I grant the authorities of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (EU Institution hosting student/employee) staff, faculty and administrators full authority to report to the appropriate University of Georgia authorities any and all such incidents, under the applicable laws (including but not limited to Title IX and the Clery Act), whether or not it involves disciplinary action.

**Date [Month/Day/Year]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signatures can be in handwritten or digital format.**

**If you have questions about this Consent, please contact** [[insert information for responsible person in University Unit]]:

NAME:

UNIVERSITY OF GEORGIA UNIT:

PHONE NUMBER:

EMAIL: