**Interim Support Scheme
 Data Processing Consent Form**

Please complete this form after you have read the privacy notice and return it using the email address below. You can:

* Print, complete, sign and return a scan or photo of the form, OR
* Complete the form electronically and return it as an attachment from your email address.

# If you have any questions about the Interim Scheme process, please contact the Panel Secretary at the address below before you decide whether or not to apply.

Please tick the boxes that apply and sign and date the form.

I consent to my personal information being processed as follows:

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| --- | --- |
| * To share information with your advocate (if applicable)
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| * In consultation with you, to share your details with an appropriate independent source, such as an Occupational Therapist, to obtain further information to better inform how the Scheme may support you
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| * To contact you to obtain feedback about the Scheme
* To contact you to inform you about survivor engagement events and opportunities in the National Safeguarding Team
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|  |  |

**OR**

I confirm my consent to all items above.

**You can withdraw your consent at any time by contacting the Panel Secretary using the contact details below.**

**It is your right to withdraw consent at any point of your application. If you withdraw consent we will explain how this will affect your application so that your decision is an informed one.**

Name …………………………………………………...

 Signed …………………………………………………... Date …………………….

Please return to:

Support Scheme Email: SupportScheme@churchofengland.org