

Client number:

Reference number:

### **Request for the provision of an advisory service**

I hereby request for the provision of a consulting service.

The child's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

School, class: \_\_\_\_\_

Legal guardian: \_\_\_\_\_

Contact e-mail: \_\_\_\_\_ Contact phone  
number: \_\_\_\_\_

### **Information about consulting service and consent to the service provided**

I was informed in advance about the source, scope, duration, goals and procedures of the provided consulting service, about the benefit and all foreseeable consequences that may result from the service provided.

I understood the information provided, additional questions were answered. **YES – NO**

The minor child was adequately instructed, he/she was given the opportunity to ask supplementary questions with regard to his/her age and intellectual maturity.

### **Information on processing of personal data and agreement to processing of personal data („Consensus“)**

According to Article 6 paragraph 1 letter a) and Article 7 of regulation (EU) 2016/679 of the European Parliament and of the Council of April 27, 2016, on the protection of natural persons in connection with the processing of personal data and on the free movement of such data and on the repeal of Directive 95/46/EC („GDPR“).

I hereby acknowledge that VDS STEP processes **personal data** of client (or his/her legal guardian). We will process your personal data for the purpose of complying with another legal regulation.

I agree that VDS STEP processes **sensitive personal data** of the client (or his/her legal guardian). We will process your sensitive personal data based on this „Consensus“. The granting of this „Consensus“ is not a condition for the provision of the service. The full text of the „Consensus“ is available on our website: [www.ppporadna.cz](http://www.ppporadna.cz)

Information worker:

In Kladno, date: \_\_\_\_\_

Signature of legal guardian or adult client