As a student at Emeris, you have a right to privacy regarding your personal information. You also have the right to access personal information that Emeris holds about you. If you wish to seek access to your personal information or enquire about the handling of your personal information, please contact the Registrar by emailing registrar@emeris.ac.za If you wish to give permission to Emeris to disclose your personal information to your parent/s, legal guardian/s, sponsor and/ or any other specified individual, please complete this consent form to authorise such disclosure to specified, nominated third parties, even if you have previously completed other consent forms (i.e. with your sponsor in terms of your bursary agreement).

If you do not wish to give Emeris permission to disclose your personal information to a third party, please complete Section B of this form.

Consent to disclose personal information to a specified, nominated third party

I, the undersigned, ...(print full name),

with Emeris student number ..... , a student at

Emeris (campus)……., hereby authorise Emeris to disclose the following information about me

(please tick the appropriate box/es):

☐ **Financial Information** (including records of payment or non-payment); and/or

☐ **Academic information** (including, but not limited to, programmes schedules, programme results, attendance records and copies of academic warnings)

This information may only be disclosed to (please tick the appropriate box/es):

☐ **Spouse or Partner** (please provide full names):

.....

☐ **Sponsor**, (please provide the full name of your Sponsor and the relevant contact details):

.....

.....

.....

☐ **Other** (please provide full names):

.....

_____

Student Signature

Signed at .....on the ..... day of ..... 20 .....

The consent granted by you authorising Emeris to disclose personal information to a specified or nominated third party will expire automatically three (3) months after the date of your withdrawal from the institute or graduation from the Independent Institute of Education.

You may also withdraw or amend your consent at any time by notifying Emeris in writing to the Registrar. Your specified, nominated third party will not be notified of any withdrawal or amendment of your consent. In particular, please consult with your sponsor about the effects of refusing or withdrawing your consent to disclose your personal information to such sponsor.

Emeris cannot and will not advise you of these effects and takes no responsibility for the sponsor's actions (i.e. refusal to pay, limitation of benefits or withdrawal of funding) as a result of your refusal to sign this consent form or later withdrawal or amendment of your consent.

SECTION B

I, the undersigned.....(print full name),

with student number....., a student at Emeris do not wish to

give permission to Emeris to disclose any of my personal information to a third party.

_____

Student Signature

Signed at .....on the ..... day of ..... 20 .....

Office use only (Student Administration)

Consent is to be recorded in the Student Information System

□ Type of information has been recorded (Financial and/or Academic)

□ Third party information has been recorded (Spouse/Partner/Family Member/Sponsor/Other)

□ The date of consent has been recorded

□ Original consent form placed on the student profile on the Student Information System

Comments: _____

Processed by: _____ Date: _____