

Form of consent to personal data processing.

CONSENT of a legal representative for processing of personal data of an underage child

" ___ " ___

I, _____,
(Surname, First name & Patronymic)

_____ series _____ No _____ issued by _____
(type of identification document)

_____ ,
(where and by whom)
residing at the address : _____

_____ ,
acting as a parent (legal representative) of an underage child

_____ ,
(Surname, First name & Patronymic of a child)

_____ series _____ No _____ issued by _____
(type of identification document)

_____ ,
(where and by whom)

hereby give my consent to the implementation by the Autonomous noncommercial organization of higher education "Innopolis University", registered address: 1, Universitetskaya str., Innopolis, of the automated data processing, as well as personal data processing of my underage child, without the use of automation tools and confirm that when giving such a consent, I'm acting by my own will and in the interests of my child.

Purpose of personal data processing:

The consent is given by me for the purposes of conclusion and execution of the contract for accommodation in the residential complex of the Autonomous noncommercial organization of higher education "Innopolis University", located at the address: Republic of Tatarstan, Verhneuslonskii department, Innopolis city, Universitetskaya str. 1, building 1, 2, 3, 4, (hereinafter referred to as Dormitory) and temporary residence registration.

The consent is given to the processing of the following personal data:

It is extended to the last name, first name, patronymic, date and place of birth, address data (registration at the place of residence, actual residence address), data of an identity document, contact numbers, e-mails, Taxpayer Identification Number (INN), Insurance number of the individual ledger account (SNILS), citizenship, place of employment (if any), main place of study (if available).

Authorized actions regarding personal data:

This Consent is provided for the implementation any actions concerning my personal data which are necessary or desirable for the achievement of the above goals, including (without restriction) gathering, recording, systematization, accumulation, storage, refinement (updating, modification), extraction, usage, depersonalization, blocking, deletion, destruction of personal data, processing order:

- JSC "Innopolis" (the legal address: The Republic of Tatarstan, Verhneuslonskii department, Innopolis city, Sportivnaya str. 107; assignment purposes: accommodation in the Complex and registration at the place of temporary stay in the Innopolis city).
- To the Executive Committee of the JSC "Innopolis" (legal address: The Republic of Tatarstan, Verhneuslonskii department, Innopolis city, Sportivnaya str. 107; assignment purposes: accommodation in the Complex and registration at the place of temporary stay in the Innopolis city).

Processing period:

This Consent shall be valid for 10 (ten) years upon signature by.

This Consent may be revoked by myself in written form.

(date, full name, signature of the person who gave one's consent)

Power of attorney
to represent the interests of a minor child
y. _____

date in words (date, month, year)

I, _____,
Full name in words

(date of birth: _____,
details of the identity document: series and number, issued by whom and when

registered at the address:

being the legal representative of a minor child _____
Full name of a child

date of birth: _____,
details of the identity document: series and number, issued by whom and when

is confirmed by the birth certificate _____, that
birth certificate details: series and number, issued by whom and when

I hereby authorize _____
Full name of the representative

date of birth: _____,
details of the identity document: series and number, issued by whom and when

registered at the address: _____

– (hereinafter referred to as the Representative) perform the following actions on my behalf and in the interests of my minor child (hereinafter referred to as the Child) regarding the provision of accommodation services to the Child in the residential complex of ANO HE “Innopolis University”:

– protect the rights and represent the legitimate interests of the Child in front of the ANO HE “Innopolis University”(MSRN 1121600006142, TIN 1655258235);

– conclude contracts for the provision of accommodation services in the residential complex of ANO HE “Innopolis University” for the period from «____»__20__y. till «____»_____20__y. with cost up to 20 000,00 (twenty thousand) rubles;

– sign and submit all documents, certificates, consents (including on the processing of personal data), applications necessary for the provision of accommodation services in the residential complex of ANO HE “Innopolis University”;

– pay the necessary expenses and make a refund of overpaid funds;

– get acquainted with all the documents regulating the provision of accommodation services in the residential complex of ANO HE "Innopolis University", including the local acts of ANO HE "Innopolis University”;

– be responsible for the actions (no actions) of the Child and for the harm resulting from such actions (no actions), and sign documents related to the implementation of such actions (no actions).

I confirm that I have read and I agree with the Rules of residence in the residential complex of ANO HE “Innopolis University" and the application of measures of responsibility for their violation.

Consent to the processing of the Child's personal data, a copy of the passport of the legal representative and a copy of the Child's birth certificate are attached.

The power of attorney is issued for a period of up to « _____ » ____20__y., the powers under this power of attorney cannot be transferred to other people.

Signature of the legal representative:

signature / _____
decryption of the signature

This power of attorney is certified by me, _____

(Full name, position, place of work, if available, the seal