

## COMMUNICATIONS AND MARKETING CONSENT FORM – July 2018

All Students and Parents

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### Information on UWC Atlantic College’s processing of personal data in the form of college communications and marketing activities.

During a student’s time at UWC Atlantic College, we may wish to use your contact details to update you regarding college activities and to share other communications which may be of interest to you. These communications may be shared in both printed and digital form, in various channels where UWC Atlantic College shares information regarding its activities, and could include:

- Direct contact methods including email, telephone, postal communications
- Communications via the college website
- Communications via college systems
- Communications via social media
- Invitations to participate in college events/fundraising activities

### Compliance with the General Data Protection Regulation (GDPR).

The college is committed to meeting the requirements of the GDPR, and therefore requests consent (below) for the use of your contact details. You can withdraw your consent at any time by contacting the college Data Controller.

The Vice Principal (Operations and Administration) is appointed as the Data Controller. If you have any enquires in relation to this consent, please contact the Data Controller, Paul Robinson, via email [paul.robinson@atlanticcollege.org](mailto:paul.robinson@atlanticcollege.org). The Data Controller will also act as the contact point for any requests for personal data, or any complaints in relation to the processing of personal data.

Further information regarding the college approach to personal data can be viewed in the college Data Protection Policy, Data Retention Policy and relevant Privacy Notice.

### Consent for the processing of personal data to receive college communications and marketing.

**Name of Student:** \_\_\_\_\_

I hereby consent for UWC Atlantic College to store, process and use my contact details for the purpose of updating me regarding college activities and to share other communications which may be of interest to me.

Name of person responsible for this student:

\_\_\_\_\_

Relationship to the student:

\_\_\_\_\_

Signature of person responsible:

\_\_\_\_\_

Date (Date/Month/Year):

\_\_\_\_\_

Signature of student:

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Date (Date/Month/Year):

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