T.H.I.N.C.S
TONY HELLIWELL
INSURANCE NURSE CONSULTANCY SERVICES LTD

Consent Notice:

Consent is just one of the lawful reasons to process a person's data, if consent is difficult to achieve it is possible to look at a different lawful basis. If consent is the most appropriate basis it is vital that consent is captured according to the strict GDPR guidelines.

- make your consent request prominent, concise, separate from other terms and conditions, and easy to understand.
- include the name of your organisation;
- include the name of any third-party controllers who will rely on the consent;
- include why you want the data;
- include what you will do with it; and
- include that individuals can withdraw consent at any time,
- avoid making consent a prerequisite of a service

Consent Statement:

THINCS Ltd has been asked to conduct a medical and employment assessment by your insurance company [----------------------------------]. As part of your assessment we will collect details about you, your medical condition, and your fitness to work. These details will then be passed to your insurance company for further consideration.

THINCS Ltd will not share you information with any other company other than your insurance company. You will not receive any further communication from us, we will not send you marketing information or any other information. We will store your details securely for a period of one year after which time your details will be destroyed.

Important:
You can refuse to give consent, we will pass this decision on to your insurance company. You can object to processing, withdraw or amend your consent at anytime, simply visit our website at www.thincs.co.uk for more details, contact:

The Data Controller
PO Box 214
Crowborough
East Sussex. TN6 9AD.

If you consent to THINCS Ltd collecting your data in order to complete your assessment as described above please and initial and date below:

_____
Initials / Date

Our Privacy Policy describes exactly how we collect, process, and store your information. This is an important document and you should take time to read it. Please sign and date below to confirm that you have received and understood the privacy statement [1a].

#
#
Name: Date: