

**CONSENT TO PROCESS PERSONAL INFORMATIOB TERMS OF PROTECTION OF INFORMATION ACT, 4 OF 2013 POPI**

1. I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with ID Number: \_\_\_\_\_\_\_\_\_\_\_\_ hereby give my consent to Safe IT Training Solutions and Services to collect, process and distribute my personal information where Safe IT is legally required to do so.
2. I understand my right to privacy and the right to have my personal information processed in accordance with the conditions for the lawful processing of personal information.
3. I acknowledge that I understand the purpose for which my personal information is required and for which it will be used.
4. I hereby consent that I understand that third parties will have access to my personal information, and I hereby consent Safe IT to share my personal information strictly for reporting to the relevant third parties or training institutions.
5. I understand that, should I refuse to provide Safe IT with the required consent and or information, Safe IT will be unable to assist me in becoming their member and accessing learning and work-based opportunities.
6. I understand that further that all my personal information which I provide to Safe IT will be held and /or stored securely for the purpose for which it was collected.
7. I declare that all my personal information supplied to Safe IT for the purposes of recruitment for learning and work-based opportunities and related legal and operational reasons is accurate, up to date is not misleading and that it is complete in all respect.
8. I undertake to immediately advise Safe IT of any changes to my Personal Information should any of these details change.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Learners Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_