Support and Advocacy

I consent and give authority to Sage Advocacy to act on my behalf and to assist me on matters relating to:

🞏 Finances 🞏 Social/Personal 🞏 Healthcare/Patient Advocacy

Specifically, the following issue(s):

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Person(s) / Organisation(s) with whom Sage Advocacy has authority to act:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
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Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sage Representative\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Where the named individual is no longer in the role of a Sage Representative, Sage Advocacy is considered to have authority

to act and will appoint a representative of the organisation to act on behalf of the named person.

**Consent Form**

Information and Data Protection

Personal data is processed by Sage Advocacy based on the individual’s explicit consent. Where the individual is unable to give consent, personal data is processed by Sage Advocacy based on the vital interests of the individual. Sage Advocacy complies with the Data Protection Acts, 1988-2018 (including GDPR).

All information provided is safeguarded securely, safely, and privately. Sound recordings of any meeting whether involving third parties or otherwise, without permission of all participants will be regarded as a data breach.

The information may be retained for up to 10 years, and may be anonymised for systemic case research and statistical purposes.  We do not share any service user information with third parties without explicit consent, unless we are required to do so by law or to protect the service user or another individual from serious harm.

There are rights available to data subjects, including the right to withdraw consent.  For further information see <http://ec.europa.eu/justice/data-protection/reform/files/regulation_oj_en.pdf>

🞏 I consent to Sage Advocacy collecting, using and storing my personal information to provide me with the service I have requested.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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