

**Dignity 4 Patients**

First Floor  
Park Heights  
Grange Rath  
Drogheda  
Co. Meath

**Helpline:** 041-9843730  
**Helpline Text:** 086 1654111  
**Office:** 041-9845761

**Office Open:** Monday – Wednesday  
**Helpline Hours:** 10:00am – 01:00pm

## Trustee/Employee Data Protection & GDPR Consent

*Your personal data is our concern, and your data is safe with us – and stays with us.*

We understand the importance of protecting your privacy. Hence, we have updated our Data Protection Policy to ensure compliance with the laws on data protection under the European Union's General Data Protection Regulations (GDPR). Please take a moment to familiarise yourself with our privacy practices and sign the consent form below for us to hold data in relation to your Trusteeship/Employment with DIGNITY4PATIENTS.

### Collection and use of Personal Data

Personal Data is information that can be used to identify you. You may be asked to confirm your personal data from time to time to keep our records up to date. At DIGNITY4PATIENTS we will NOT share your data with any other 3<sup>rd</sup> party without your explicit consent or unless required to by laws or legislation. We may however use the data, you provided, to contact you or hold records relating to you. Some examples of the personal data collected for Trustees/Employees and processed by us includes, but is not limited, to:

1. Name
2. Phone number
3. Email address
4. House address
5. Next of Kin
6. PPS number
7. Date of Birth

DIGNITY4PATIENTS is under a legal obligation to hold data on Trustees/Employees for specific lengths of time. The following timeframes are a guide to how long we may hold your data on file. Retention of trustee terms of office and Trusteeship records, employment taxation records, as well as other legal obligations of up to 7 years. Please complete the consent form to allow us permission to us to hold the data listed above in relation to your time/work with DIGNITY4PATIENTS.

I the below signed Trustee/Employee of DIGNITY4PATIENTS agree to my data being collected, processed, and stored for the purpose of complete legal and business records relating to me.

**Print Name:** \_\_\_\_\_

**Trustee / Staff Member Signature:** \_\_\_\_\_

**Date of Declaration:-** \_\_\_ / \_\_\_ / \_\_\_