



**Data Subject Consent**

(‘Data Subject’ means the individual who is the subject of the personal data being disclosed by the Group)

I, ..... (*insert name of ‘Data Subject’*) give permission for the RNN Group to disclose the following information:

[Empty box for disclosing information]

I give permission for the RNN Group to disclose the information identified above to:

Name: .....

Address: .....

Postcode: .....

Email: .....

**THIS SECTION MUST ONLY BE COMPLETED BY THE ‘DATA SUBJECT’ IDENTIFIED ABOVE**  
Signed: .....  
Print name: .....  
Date: .....

On completion, this form and any supporting information must be sent to:

Email: dsar@rnngroup.ac.uk

Post:  
For the attention of the Information Governance Team  
RNN Group  
Eastwood Lane  
Rotherham  
S65 1EG