

Date of receipt of the application	Registration number

(To be filled in by The Social Policy Coordinator of the NEUCA Foundation for Health)

REQUEST FOR SUPPORT FOR INDIVIDUALS UNDER THE CHARITY SUPPORT PROGRAMME OF THE NEUCA FOUNDATION FOR HEALTH

PARENT, GUARDIAN, CUSTODIAN,

(To be filled in by the Applicant)

Full name of the Applicant	
Relationship of the Applicant to the person needing support <i>(parent? guardian? custodian?)</i>	
Location	
Postcode	
Street name	
Personal Identification Number (PESEL) / Tax Identification Number (NIP)	
Telephone number	
Email address	

Name of person entitled to benefit from charitable support (the person to whom the support relates)	
Location	
Postcode	
Street name	
Date of birth	
Personal Identification Number (PESEL) / Tax Identification Number (NIP)	
General health condition	

Signing and sending back the questionnaire does not imply the granting of support from the NEUCA Foundation for Health. Completing this formality only allows your application to be processed further.

Form of support: *(select one or more and describe)*

Financial support:
Amount:
In-kind support:
Other:

Purpose of the support: *(justification of the need for the support)*

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List of documents attached to the application

1. 2. 3. 4. 5. 6.

The application form will be processed once the complete set of required documents is attached.

I hereby acknowledge and accept the Terms and Conditions of Granting Benefits under the NEUCA Foundation's Charity Support Programme for Health.

.....
(Date and legible signature of the

Applicant)

Signing and sending back the questionnaire does not imply the granting of support from the NEUCA Foundation for Health. Completing this formality only allows your application to be processed further.

Consent to processing of Applicant's personal data

I consent to the processing by the NEUCA Foundation for Health with its registered office in Toruń, at Forteczna 35-37, 87-100 Toruń, for the purpose necessary to verify and process the application submitted and to award the benefit in the framework of the NEUCA Foundation's Charity Support Programme for Health.

The consent is voluntary but necessary for the above stated purpose. Consent may be withdrawn at any time, but this does not affect the lawfulness of data processing prior to the withdrawal of consent. Consent can be withdrawn by sending an email to kontakt@fundacjaneuca.pl. Withdrawal of consent is tantamount to withdrawal of the application for support under the NEUCA Foundation for Health Charitable Support Programme and withdrawal of support.

.....
(Date and legible signature of the

Applicant)

Consent to processing of personal data of the person concerned

I consent to the processing by the NEUCA Foundation for Health with its registered office in Toruń, at Forteczna 35-37, 87-100 Toruń, of my personal data (provided in the above application and the documents attached to it), including data on the health condition of

.....
(full name of the person concerned)

for whom I am the parent/custodian/legal guardian*, for the purpose necessary to verify and process the application submitted and to award the benefit under the Charity Support Programme of the NEUCA Foundation for Health.

The consent is voluntary but necessary for the above stated purpose. Consent may be withdrawn at any time, but this does not affect the lawfulness of data processing prior to the withdrawal of consent. Consent can be withdrawn by sending an email to kontakt@fundacjaneuca.pl. Withdrawal of consent is tantamount to withdrawal of the application for support under the NEUCA Foundation for Health Charitable Support Programme and withdrawal of support.

* delete as appropriate

.....
(Date and legible signature of the

Applicant)

The administrator of the personal data provided in the above application and the documents attached to it is the NEUCA Foundation for Health with its registered office in Toruń, at Forteczna 35-37, 87-100 Toruń.

Signing and sending back the questionnaire does not imply the granting of support from the NEUCA Foundation for Health. Completing this formality only allows your application to be processed further.

The administrator can be contacted by e-mail at kontakt@fundacjaneuca.pl or in writing at the above address. The administrator can be contacted in all matters concerning the processing of personal data and the exercise of rights related to data processing.

Your personal data, including health data, will be processed for the purpose of:

- verifying and processing your application and granting a benefit under the NEUCA Foundation's Charity Support Programme for Health - the legal basis for processing is the consent you have given, i.e. Article 9 (2)(a) of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46/EC (, "GDPR"),
- the conclusion and execution of the donation agreement, in the case of the provision of a benefit - the legal basis for the processing is the necessity of the processing for the conclusion and execution of the agreement, i.e. Article 6 (1) (b) GDPR.

Personal data may be provided to entities processing personal data on behalf of the administrator (e.g. T service providers) - whereby such entities process data on the basis of a contract with the administrator and exclusively on the administrator's instructions.

Personal data will be stored for the time necessary to collect and process applications for support and award benefits under the NEUCA Foundation's Charitable Support Programme for Health, unless you withdraw your consent to the processing of your data beforehand, and until the statute of limitations for claims arising from the application.

The data of the Applicants and the persons to whom the support has been granted will be stored until the statute of limitations for claims under the donation agreement or until the expiry of the obligation to store the data resulting from the law.

You have the right of access to your data and the right to request their rectification, erasure or restriction of their processing. Upon your request, the administrator will provide you with a copy of the personal data being processed, and the administrator may charge a reasonable fee for any further copies you request based on administrative costs.

You have the right to withdraw your consent. The withdrawal of consent does not affect the lawfulness of processing carried out on the basis of consent before its withdrawal. Withdrawal of consent is tantamount to withdrawal of the application for support under the NEUCA Foundation for Health Charitable Support Programme and withdrawal of support.

You also have the right to data portability, i.e. to receive your personal data from the administrator, in a structured, commonly used, machine-readable format. You may send this data to another administrator.

You are also entitled to lodge a complaint with the data protection supervisory authority.

In order to exercise the above rights, please contact the data controller. The contact details are specified above.

Providing personal data is voluntary, however, it is necessary in order to verify and process the submitted application and to grant a benefit within the framework of the NEUCA Foundation's Charitable Support Programme for Health.

Signing and sending back the questionnaire does not imply the granting of support from the NEUCA Foundation for Health. Completing this formality only allows your application to be processed further.