



Parent/ Legal Guardian consent form on behalf of students of age 15

I the undersigned Mr./Mrs./Dr. _____ ID. _____ Parent/Legal guardian of _____ ID. _____ referred to as the “Student”, give my consent to the Student to enrol for online/blended part-time educational courses with the above Directorate. I also give consent to the Directorate to collect and process personal details of this Student limitedly to those required for the performance of the course/s. Personal data of this student may be retained by the Directorate to form part of its research and statistical records in accordance with the Data Protection Policy of the DRLLE accessible from: <https://lifelonglearning.gov.mt/>. No personal data of this Student shall be transmitted to third parties except with the express consent of the Parent/Legal guardian, or as permitted at law and to other Government entities.

In accordance with the provisions of the General Data Protection Regulation (GDPR) (EU 2016/679), and the Data Protection Act cap. 586 of the Laws of Malta, the Parent/Legal Guardian is hereby informed that he/she can order rectification/deletion of the Student’s personal data and/or to withdraw at anytime the consent given herein without prejudice to the legality of consent previously given.

Parent/ Legal Guardian: _____

Date: _____

Note: This form together with a copy of the Parent’s/Guardian’s and Student’s identity documents shall be presented to the class educator duly completed on the first day of the course. In case of courses delivered online a scanned image of these documents is to be sent to the course educator on the first day of the course. For Asynchronous courses this form, and identity documents are to be sent on the Learning Box email: learningbox.mfed@gov.mt. Students concerned shall not be allowed to commence the course in the absence of submission of this form, duly completed, and identity documents.