

Acting as the legal representative, I _____
 am asking the Herzen State Pedagogical University to provide to my child _____
 the service for the Test of Russian as a Foreign Language and also consent to the processing of mine and his personal data.

Testing _____	Application Form	Date: _____
Full Name		
Sex		
Country of Citizenship		
Native language		
Other languages		
Education		
Passport or Identification document number		
Date of Birth		
Testing level		
Test date		
Contact Number		
E-mail		
Has he/she studied Russian before? For how long? Where? What for?		
How does he/she plan to use Russian?		
<p>The above personal data, as well as the information about the results of my testing, can be processed by the Herzen State Pedagogical University (address: Moika River Embankment, 48, 191186, St. Petersburg) by means of collection, systematization, storage, use, transfer and destruction in order to comply with the requirements of the legislation of the Russian Federation (including the provision of information at the request of state bodies). The term of processing personal data – 10 (ten) years from the date of filling in this form. I am notified about the video recording during the test.</p>		<p>Signature</p> <p>_____</p>

Consent to the processing of personal data	
Full name	
ID details (<i>passport number and series, date of issue, date of expire, issuing authorities or identification document number</i>)	
Address	
Personal data operator	The Herzen State Pedagogical University of Russia
Personal data operator address	191186, 48 Moika Embankment, St. Petersburg 191186, Russia
<p>By signing this consent, the subject hereby grants the consent of the above personal data operator to the processing of the following personal data:</p> <ul style="list-style-type: none"> • full name: surname, name and patronymic • date of birth (age); • sex; • place of birth and nationality; • addresses of registration and actual residence; • passport number and series, date of issue, date of expire, issuing authorities); • contact details (phone number, email addresses); • education; • the purpose of passing the test of Russian as a foreign language; • information about the results of the test of Russian as a foreign language; • the number and date of issue of the certificate issued as a result of passing the state test of the Russian language as a foreign language; • biographical information (experience of learning Russian); • video/audio; • photographic images. <p>The processing of these personal data provided may be carried out by the Herzen State Pedagogical University of Russia» in a mixed form by collection, systematization, accumulation, storage, refinement, use, transfer, blocking and destruction in order to comply with the requirements of the legislation of the Russian Federation (including providing information at the request of government authorities).</p>	
Validity of consent	Personal data may be processed under the conditions provided by this consent, within 10 (ten) years from the date of its signing.
Consent withdrawal method	This consent may be withdrawn by sending a request to the above address of the operator of personal data with a request to discontinue the processing of personal data. The application must contain the number of the main document certifying the identity of the subject of personal data; information about the date of issue of the specified document and the issuing authority, as well as a handwritten signature of the subject of personal data.
Signature	_____ (_____)
Date of signature	