**CONSENT FORM**

**Form to indicate consent to share personal and confidential information**

|  |  |
| --- | --- |
| **Project, programme or reference**: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1. Your details** | | | | |
| Your surname: | |  | | |
| Your forenames: | |  | | |
| Prison Number: | |  | | |
| **2. Your personal information that we would like to share** | | | | |
|  | | | | |
| **3. The people or organisation that we want to share this information with (please indicate if you do not want us to share with any of those listed)** | | | | |
|  | | | | |
| **4. The purpose or reason why we want to share it** | | | | |
|  | | | | |
| **5. Declaration** | | | | |
| I give you permission to share my personal information as described in section 2, with the people indicated in section 3 and for the purpose described in section 4.  I understand that I may withdraw my consent at any time. | | | | |
| Signed |  | | Date |  |
| **6. To be signed by the person requesting consent** | | | | |
| Signed |  | | Date |  |