**Consent for Use of Personal Data**

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| Full Name |  |
| Applying Position |  |
| The purpose of this documents is to give consent to and authorize the Secretariat for the Asian Forest Cooperation Organization (hereinafter referred to as the “Secretariat”) for collection and use of your personal data provided in your application documents for the purpose of processing your application for employment.We will collect and use the personal data that you have supplied to facilitate the processing of your application for employment purposes only. Please note that the information you provide may be used by a third party to enable us to process your application. These third parties may carry out some of the processing and administrative functions for the Secretariat and would be under duty of care to maintain the appropriate levels of security and confidentiality and only use the information as instructed by the Secretariat. The personal data held by the Secretariat relating to the applicants will be kept strictly confidential. The Secretariat may collect information through other sources for processing and evaluating your application for employment. If your application is successful, the information will be used in the administration of your employment. As part of assessing your suitability to work with the Secretariat, we may use your information to conduct reference checks. If necessary, the Secretariat may provide your personal data to relevant government agencies, public agencies, or other organizations for verification of the information provided in your application. If your application is unsuccessful, the Secretariat may retain and use your personal information for two (2) years from the receipt of your application documents to deal with any matter which may arise in connection with your application. By signing below, you agree to your data being used in conjunction with the recruitment and employment purposes. You are responsible for ensuring that the personal data is correct and true. |
| (APPLICANT)I have read and consent to the above.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dd/month/yyyy Signature |