

THAI-CHINESE INTERNATIONAL SCHOOL

Personal Data Consent Form

Thai-Chinese International School (the "**TCIS**") is committed to providing you the educational services with the personal data security standards in compliance with Thailand's Personal Data Protection Act B.E.2019, applicable laws and regulations. To achieve this purpose, the school would like to ask for your consent to allow our school to collect, use and/or disclose your personal data obtained from you or other sources for the following purposes:

I hereby agree and consent that the school may collect, use, disclose my health information and medical data/records for the purpose of health care in School includes health-related examination, assessment, service or procedure provided to students to diagnose, treat or maintain their physical or mental wellbeing, prevent disease or injury, or promote health. The processing of my health information and medical data/records will be limited only to the school teachers, infirmary staff or any medical practitioners who are involved. I acknowledge that I have the right to make inquiries, amend or withdraw my consent given in this in the future via School Call Center tel. 02 751-1201 or email: dpo@tcis.ac.th

*Please note that by not giving consent for this purpose, the school will not be able to provide you with the suitable health care, especially regarding sudden illness or allergies.

For the Promotion and Marketing activities (e.g., promoting, marketing, yearbook, advertising school services, school's activities, newsletters, campaigns, or any public relations) may students' image and name be used in printed publication or social media for the school promotion and marketing purpose. To offer School products/services, discounts, promotions, newsletters sent directly to your email contact.

I have read and understand the School Privacy Notice which contains the details of the protection of my personal data.



To comply with the Personal Data Protection Act, applicable laws and regulations, your permission is necessary prior to the student taking part in any of the above-mentioned about school purposes. Please tick the appropriate box/boxes, reply to the question, then sign and date the form where indicated. Kindly return the complete form to the Head of School or her/his representative by email address info@tcis.ac.th or return by hard copy at School Admission Office.

I consen	t	I do not co	onsent
Date			
<u>Student</u>			
First Name- Last Name			
ID Card Number			
Passport Number (For No			
Class/Year			
Telephone Number			
Parents/Legal Guardian			
First Name- Last Name			
ID Card Number			
Passport Number (For No	n-Thai Citizen)		
Telephone Number			
Signed	(Student)	Signed	(Parent/ Legal Guardian)
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