**Registration for the state-wide career orientation program BRAFO including the computer supported skills evaluation (BRAFO-KE) and agreement for the sharing of personal data necessary for the implementation of the program.**

|  |  |
| --- | --- |
| **To be completed by the contractor** | |
| Action | BRAFO – Berufswahl Richtig Angehen Frühzeitig Orientieren (Approaching the correct career path early on) |
| Institution |  |
| Ticket-Nr. |  |
| Entry Date |  |
| TN-Nr. within the Project |  |

Dear Parents, dear caretakers,

It is time: your child’s systematic career orientation as part of the state-wide program BRAFO can begin. For this, we ask you to carefully read the following information and fill in the correct boxes with your child’s personal information, so that the conditions for a successful participation in BRAFO are met. Thank you!

**Registration/Child’s personal Information**

|  |  |
| --- | --- |
| **To be filled out by the parents/caretakers** | |
| Last name, First name |  |
| Birthday |  |
| Gender | O male  O female  O neither |
| Street, House number, Zip code, City |  |
| Name and Address of the School |  |
| Type of School | O Sekundarschule (secondary school)  O Gemeinschaftsschule (general school)  O Gesamtschule (integrated school)  O Förderschule (school of special education) |
| Does your child have foreign origin? \* | O yes  O no  O no specification  **If yes:**  Is your child a citizen of a non-EU Country? \*  O yes  O no  O no specification |
| Does your child have a special needs card or any other comparable official document? \* | O yes  O no  O no specification |
| Is your child a member of a minority?  (For example: marginalized communities, such as Roma)\* | O yes  O no  O no specification |
| Is your child affected by homelessness or discrimination in the housing market?\* | O yes  O no  O no specification |

\*Voluntary information

**Information to data collection and processing**

The project is partially funded through resources from the European Social Funds as part of the federal budget, the Unemployment Insurance, and the state Saxony-Anhalt. The mentioned project organizers, the Employment Agency, and the Office of State Administration share the above mentioned and the children’s participation data with each other for the purpose of settlement and disbursement of financial resources. Furthermore, in the Employment Agency and the Office of State Administration the data will be used for audits by the court of justice as well as, in anonymized form, for statistical purposes and evaluations. The agencies must prove that children with a migration background and/or handicapped children are adequately supported. Therefore, we ask that you also fill in the voluntary information. In the mentioned agencies, the information is overseen by the data privacy officer of the state Saxony-Anhalt and the data privacy officer for the Employment Agency, as well as protected by Germany’s laws of data privacy.

Within the project, your child uses a computer-based career orientation procedure called BRAFO-KE. The organizer uses the results for an individual consultation with you and your child. The collection, evaluation, and use of personal data are necessary for the consultation, to be able to assign the result to a specific person, and properly prepare the hand-out with the results. The result will be given to your child as a so-called career-choice passport und possibly stored at school. Later, you or your child decide if the Employment Agency may use the results to optimize career consultation and support. The organizer and possibly school, must take responsibility in protecting your child’s data and are overseen by the data privacy officer of the state Saxony-Anhalt. Further Information about the processing of data in the computer program may be obtained from the project organizer.

You may find the contact information for the data privacy officer at <https://datenschutz.sachsen-anhalt.de> or [www.arbeitsagentur.de](http://www.arbeitsagentur.de).

You may refuse to consent (signature) or withdraw consent at any time. This will not result in any legal disadvantages for you or your child. Your child must then participate in another school lesson. Even in the case of withdrawal, the data will be deleted only after the legal statute of limitations and revision period for the subsidies has expired.

**Explanation (Child’s Registration)**

I hereby consent for this child to participate in BRAFO, and that information may be processed as described.

I have received a copy of this registration.

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Place, Date Parent / Caregiver Signature