

Complaints Office against Discrimination, Mobbing, and Stalking

Declaration of consent

Family name: _____

Given name:	
I am studying at the University of Potsdam, and I hereby conse	
personal data for the purpose of handling my complaint by the	•
University of Potsdam and persons involved according to the Anti	i-Discrimination Guidelines.
This consent also extends to special categories of data, such	as information about my
ethnicity, my political opinions, religious and ideological beliefs, in	formation about my health,
and my sexual orientation, if processing of this data is necessary to	o handle my complaint.
	
Place, date	Signatur

