**SUBMITTING EVIDENCE TO A SCOTTISH PARLIAMENT COMMITTEE**

**DATA PROTECTION FORM (UNDER 12s)**

|  |  |  |
| --- | --- | --- |
| **Name of person under age 12 :** |  | **Date:** |
| **Name of parent or guardian:**  |  |
| **Topic of submission:** |  |
| [ ]  **I give my permission to allow my child or ward to submit evidence to a Scottish Parliament Committee**[ ]  **I have read the privacy notice and understand how my personal data, and the personal data of my child or ward, will be processed.**[ ]  **I am happy for their name to be on the submission, for it to be published on the Scottish Parliament website, mentioned in any Committee report and form part of the public record.**[ ]  **I would like to be added to the contact list to receive updates from the Committee on this and other pieces of work. I understand I can unsubscribe at any time.** Non-standard submissionsOccasionally, the Committee may agree to accept submissions in a non-standard format particularly if it involves a person under the age of 12. Tick the box below if you would like someone from the clerking team to get in touch with you about submitting anonymously or for it to be considered but not published. It is for the Committee to take the final decision on whether you can submit in this way. [ ]  I would like to request that their submission be processed in a non-standard way. |

**HEALTH AND SPORT COMMITTEE**

**HUMAN TISSUE (AUTHORISATION) (SCOTLAND) BILL INQUIRY**

**SUBMISSION FROM [INSERT NAME]**

**Subtitle (Ariel 12, bold, left aligned)**

Body text (Ariel 12, left aligned)

Please do not add any organisation logos