Consent of an individual acting as consultant to the provision and processing of their personal data

I, (full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, passport series \_\_\_\_\_\_\_\_\_ No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, issued (date, issuing authority) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, residing at the address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “Data Subject”),

give my voluntary consent to AO Caspian Pipeline Consortium-K, located at: **060700,** Republic of Kazakhstan, Atyrau Oblast, Makhambetsky District, **Beibarys rural distirct, Akkaiyn settlement, street 1, building 24**,

in relation to the execution of a consulting contract,

in relation to the services that I provided under a consulting contract,

to providing and processing, including collecting, systematising, accumulating, storing, verifying (updating, modifying), using (including transferring), depersonalising, blocking and destroying

the following personal data:

|  |  |  |
| --- | --- | --- |
| **Purpose** | **Personal data** | **I give my consent (yes) / do not give my consent (no) (to be completed in person by specifying “yes” or “no”)** |
| Title | First name |  |
| Patronymic |  |
| Surname |  |
| Reference on the Operator's website | Full name |  |
| Photograph |  |
| Reference in the Operator's internal phone directory | Full name |  |
| Telephone number |  |
| Photograph |  |
| Reference on an access card to the Operator’s premises | Full name |  |
| Photograph |  |
| Compilation of the Operator’s reference book | Full name |  |
| Date, month and year of birth |  |
| Place of birth |  |
| Passport data |  |
| Citizenship |  |
| Legal address |  |
| Physical address |  |
| INN (tax identification number) |  |
| Mandatory pension insurance certificate number |  |
| Consulting contract details |  |
| Telephone number |  |
| For public birthday, anniversary greetings | Full name |  |
| Date, month and year of birth |  |
| To place information on information boards | Full name |  |
| Photograph |  |
| To issue documents in accordance with the procedures adopted by the Operator | Full name |  |
| Date, month and year of birth |  |
| Place of birth |  |
| Foreign language proficiency |  |
| Mandatory pension insurance certificate number |  |
| INN (tax identification number) |  |
| Educational background, qualifications, profession |  |
| Educational institutions attended |  |
| Employment / service history (specifying the periods of employment / service, positions) |  |
| Passport data |  |
| Physical address |  |
| Legal address |  |
| For communication in case of an emergency | Telephone number |  |
| Physical address |  |
| Immediate family members and their contact details |  |
| To send official notifications (correspondence from the Operator) | Legal address |  |

The list of operations involving personal data to which I give my consent is set out in regulations on protecting personal data, which I have read.

I have been informed and agree that my refusal to provide my personal data as outlined above could restrict the Operator’s actions that entail the processing of the above personal data.

I have been informed that I may change my decision at any time by submitting my written consent to the provision and processing of my personal data to the Operator’s HR department.

This consent shall come into effect on the day of its signing and remain valid for the duration of the civil law contract. After it expires, the consent shall remain valid for the period stipulated by Kazakhstani law for retaining documents containing personal data.

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