



### Karta klienta/Client card – Projekt AMIF/28/03

Jméno/First name\* .....

Příjmení/Surname \* .....

Pohlaví/Sex \*                      muž/male                                      žena/female

Datum narození/ Date of birth \* .....

Státní příslušnost/ Citizenship \* .....

Druh pobytu/ Type of residence permit\* .....

Číslo dokladu/ ID number\* .....

Typ dokladu/ ID type\*: .....

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Telefon/ Phone nr.: .....

Email: .....

Místo bydliště (stačí Praha 3)/ Place of residence (Praha 3 would suffice).....

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**INTEREST IN INFORMATION ON ICP ACTIVITIES.** By checking this box I give ICP consent to the processing of my contact data with the purpose of sending me information on ICP activities. Once I will not be interested in receiving this information, I can take back my consent at any time at [centrum@icpraha.com](mailto:centrum@icpraha.com).

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The administrator of your personal data is ICP. You can turn to ICP by email ([a.covrigova@icpraha.com](mailto:a.covrigova@icpraha.com)) in case you have any questions about the administration and processing of your personal data. We can share your data with an external accountant, independent auditor, providers, and state administration and self-government bodies.

We process your personal data to fulfill legal obligation, to protect the legitimate interest of ICP, which includes the protection of its property, proof of invested public financial resources, and the fulfillment of the contractual obligation of providing you with free integration services. We cannot provide you with integration ICP services in full without processing this and other additional data (mainly address and identification data, contacts, information on the progress of service providing, and if necessary, your photographs).

ICP processes your data for the following purposes: 1) your identification, 2) contacting you while providing you with the services, 3) control of invested public financial resources, 4) informing the client and the public about ICP services and activities, 5) dividing clients into groups for learning the Czech language, 6) proving compliance with the conditions for funding by EU AMIF program, 7) mapping of client family connections.



Should you decide to use the social or legal counseling service, you hereby agree that your personal and sensitive information may be handled by other ICP employees for the purpose of resolving your life situations.

Your personal data are processed by ICP only for the absolutely necessary period of time, which should be no longer than 10 years from the 1st of January of the year after the project ends.

Upon written request, ICP is obligated to provide you with all the information regarding the processing of your personal data. In case you consider that the data is not processed properly or it is incomplete, you can, according to GDPR, ask for explanations, data correction, erasure, completion, processing limitation, raise objections against the processing, or make a complaint at the Office for personal data protection.

I declare that:

- I have been informed, in conformity with GDPR, to what extent and for what purpose will my personal data be processed, by whom and in which way they will be processed and to whom they may be made accessible
- I have been acquainted with detailed information on the processing of my personal data and on my rights while filling in this form or via webpage [www.icpraha.com](http://www.icpraha.com)
- I consent to the way my personal data is to be processed
- I will provide ICP with full, exact, and true data
- I have been acquainted with all above-mentioned client rights and duties on personal data protection

I can receive a signed copy upon request. In this case, I take over all responsibility for this copy and the data it contains.

I declare that I have been informed about the services I can use free of charge. All the information was given to me in a language that I understand, and I comprehend all of it.

V Praze dne/ **In Prague, on** \*.....

Podpis klienta/zákonného zástupce/ **Client (legal representative) signature** \*.....

VYPLŇUJE POUZE PRACOVNÍK ICP/ **TO BE FULFILLED BY AN ICP WORKER ONLY**

*Pravdivost uvedených údajů byla ověřena dne/ **The authenticity of the information has been verified on\****

.....*pracovníkem/icí/ **by (podpis/ signature)\**** .....

Doplňující informace/ **Additional information:**

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.....

\*povinné údaje k vyplnění/ **obligatory data**