

Consent Form for testing CII Minors at Test Centres

Dear Parent and/or Guardian,

In order to maintain the security and highest degree of academic integrity of the tests it administers, PSI Services (UK) Limited and its affiliated companies (“PSI”) employ various mechanisms that authenticate the candidate’s test experience, including but not limited to:

1. taking a picture of the candidate’s face;
2. capturing the signature of the candidate;
3. taking a picture or copy of the candidate’s ID;
4. recording screen shots and keystrokes of the computer on which the candidate takes the test for monitoring by PSI’s trained test centre staff, and potential later review by PSI or its client test sponsors;
5. recording audio and video images of the candidate and their test environment during the test for monitoring and review by test centre staff.

Pictures, videos, and audio recordings captured by PSI in its authorised test centres before, during, and after a test will be used by PSI and its certified video review specialists to monitor, administer, and invigilate the candidate’s tests. PSI will not redisclose the information above, except to its certified video review specialists and other appropriate personnel, including client test sponsor, as required to maintain, monitor, and preserve the integrity of the test. The information will be destroyed or anonymized in accordance with our data retention policy with the Chartered Insurance Institute (you can contact psi-dpo@psionline.com for more information). If required for legal or regulatory purposes, this data may be retained for a longer period, but no longer than is legally permitted.

If you wish to revoke your consent, you may do so by contacting PSI in writing at psi-dpo@psionline.com and providing PSI with any requested information to enable PSI to execute the request (such as, candidate name, date of birth, date of test and location of test). You have the right to inspect records for which your consent was given. To do so please contact PSI at psi-dpo@psionline.com.

Please note that revoking your consent prior to the test may result in the minor being unable to sit for the test at an authorised PSI test centre.

Before PSI can take these pictures, videos, or recording, it requires the permission of the minor candidate’s parent or guardian. By signing this form, you will give PSI permission to take the photographs, information, videos, and recordings of your minor for the purposes set out above in this form.

Please note that PSI may transfer the minor's personal data to third-party service providers for processing or storage. If this data is transferred outside the UK or EU, appropriate safeguards will be in place to ensure compliance with applicable data protection laws.

Additionally, by signing this form you indicate your understanding of and consenting to the use of the minor’s personal information data as set out in the Chartered Insurance Institute Privacy

Policy (a copy of which you can find at <https://www.cii.co.uk/about-us/data-protection-and-privacy-statement/>).

Minors without signed parent/guardian consent forms will not be permitted to sit an exam/test at an authorised PSI test centre.

PSI and the Chartered Insurance Institute team appreciates your understanding and cooperation.

Parent / Guardian Consent

I hereby grant PSI Services (UK) Limited, and its affiliates, the right to take or record audio, pictures, and/or video (collectively, “Images”), and other personally identifiable information of the minor test candidate identified below (the “minor”), while the minor is within an authorised PSI test centre to sit for a test PSI is administering on behalf of Chartered Insurance Institute, and to use the Images and other personally identifiable information for the purpose of monitoring, verifying, auditing, administering, proctoring, and/or providing technical support of tests.

I represent and warrant that: (i) I have read this consent form; (ii) I am a parent or legal guardian of the minor; (iii) I understand that information found to be inaccurate could invalidate the test result and compromise the minor’s test; and (iv) I understand that PSI will not use the Images without first receiving a copy of this release signed by a parent or legal guardian of the minor, as set forth below. This consent form shall be effective from the date it is signed, and shall be binding on the minor.

Print Parent/Legal Guardian Name:

Signature: _____

Date: _____

Minor’s Full Name: _____

Minor’s Date of Birth:

Please ensure that the original of this form is taken by the minor to the test centre for submission to test centre staff on the day of testing.

Minors without signed parent/guardian consent forms will not be permitted to sit an exam/test at an authorised PSI test centre.