

Consent by Father / Mother / Legal Guardian of Student for APAARID Generation

I _____ as the **FATHER/MOTHER/LEGALGUARDIAN** of _____

With my identity proof as AADHAAR and Identity Proof Number _____

_____ Voluntarily give my consent to share his/her Aadhaar Number and demographic information issued by UIDAI with Ministry of Education for the sole purpose of creation of APAAR ID and opening of DIGILOCKER account of my child for the following intent and purposes.

I understand that my APAAR ID may be used and shared for limited purposes as may be notified by Ministry of Education from time to time for Educational and related activities. Further I am also aware that my personal identifiable information (Name, Address, Date of Birth, Gender and Photograph) may be available to entities engaged in various educational activities such as UDISE + database, scholarships, maintenance academics records, other stakeholders like Educational Institutions and Recruitment Agencies.

I authorize ministry of Education to use my Aadhaar number for performing Aadhaar based authentication with UIDAI as per provision of AADHAAR (Targeted delivery of Financial and other subsidies, Benefits and services), Act, 2016 for the aforesaid purposes. I understand that UIDAI will share my e-KYC details, in response of "Yes" with the Ministry of Education upon successful Authentication.

I understand that the information shared by me will be kept confidential and shall not be divulged to any third party except as may be required by law.

I understand that I can withdraw my consent for all or any of purposes at any time by and on withdrawal of my consent, the processing of my shared information will stop, however any personal data already been processed shall remain unaffected on such withdrawal of consent.

Place of Physical Consent _____

Date of Physical Consent _____