**Guidelines for Service Providers and Employers**

When creating a Passport Consent Form for Workers, it is important for service providers and employers to consider the following guidelines, at a minimum:

* **Keep the form simple:** The consent form should be simple and easy to understand. The form should be written in clear and concise language so that workers can easily understand what they are consenting to. The forms should be multi-lingual, both in the language primarily used by the company and one in the worker’s native language.
* **Provide clear instructions:** The form should include clear instructions on how to fill it out and what information is required. Workers should know where to submit the form and who to contact if they have any questions.
* **Explain the purpose:** The consent form should clearly explain the purpose of the request for the passport information. This includes why the information is needed and how it will be used.
* **Ensure confidentiality:** The form should include a statement on confidentiality and assure workers that their passport information will be kept confidential. Workers should feel comfortable providing their passport information knowing that it will not be shared with unauthorized parties.
* **Provide a withdrawal option:** The form should provide an option for workers to withdraw their consent at any time. This ensures that workers have control over their passport information and can revoke consent if they choose to do so.
* **Allow for alternative options:** The form should provide an option for workers to either keep their passport with themselves or with the company for safekeeping purposes only.

By following these guidelines, employers and service providers can create a Passport Consent Form for Workers that is transparent, accessible, and compliant with data protection laws. This ensures that workers feel comfortable providing their passport information and that their privacy and confidentiality are protected.

**Passport Consent Form for Workers**

I, **[Full Name of Worker],** holder of Passport No. **[Passport Number]** hereby declare that I am fully aware of my rights with regards to the safekeeping of my passport while employed with **[Company Name]**.

Please tick the box that corresponds to your preference:

**[ ]** I choose to keep my passport with myself for safekeeping while I am employed with **[Company Name]**.

**[ ]** I choose to leave my passport with **[Company Name]** for safekeeping while I am employed with them.

In the event that I choose to leave my passport with **[Company Name]** for safekeeping, I hereby authorize **[Company Name]** to retain my passport and keep it in a safe and secure location. I understand that **[Company Name]** will take all necessary steps to ensure the safety and security of my passport, and that it will only be used for the purpose of facilitating my employment and related administrative processes.

I also acknowledge that **[Company Name]** will return my passport to me as soon as possible upon my request, within 24 hours or a maximum of 6 hours in case of an emergency, or in the event that my employment is terminated. In the event that I choose to leave my employment with **[Company Name]** and my passport is in their safekeeping, **[Company Name]** will return my passport to me within **[Number of Days]** days from the date of termination.

I understand that I have the right to revoke this consent at any time by providing written notice to **[Company Name]**.

I understand that my passport information will be kept confidential and will only be used for the purposes outlined in this form. **[Company Name]** will not share my passport information with unauthorized parties and will take all necessary steps to protect my privacy and confidentiality.

By signing below, I acknowledge that I have read and fully understand this consent form and I voluntarily consent to the safekeeping of my passport by **[Company Name]** or to retain my passport with myself for safekeeping.

Signature of Worker: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_