**Consent Form for Handling of Personal Data**

**All applicants, regardless of their country of residence**, are requested to read the following information carefully. Please note that, for **individuals residing in the European Economic Area (EEA)**, these practices are also designed to comply with the requirements of the **General Data Protection Regulation (GDPR)**.

* Personal data collected through this procedure will be used solely for the following purposes:
(1) Procedures for visiting NanoTerasu and using/entering the NanoTerasu facility.
(2) Export control procedures.
* The collected personal data will be transferred to and stored on servers and archives within the **National Institutes for Quantum Science and Technology (hereinafter referred to as QST)** in Japan. QST will handle your personal data appropriately and securely, in accordance with applicable data protection laws and internal policies.
* You have the right to request access to your personal data, correction of inaccuracies, and restriction of processing while the accuracy of your data is being verified. For inquiries regarding your personal data, please contact the **NanoTerasu Users Office (usersoffice@nanoterasu.jp)**.
* If you are a resident of an EEA member state and are dissatisfied with how your personal data is handled, you may lodge a complaint with the data protection supervisory authority in your country.

If you agree to the above terms regarding the use and transfer of your personal data, please **check the checkbox, fill the date, your name, and provide your signature below**. You may withdraw your consent at any time. Withdrawal does not affect the lawfulness of any processing that occurred prior to your withdrawal.

**Applicant:
☐ I agree to the above terms. (← Check ☑ to consent)**

**Date of Consent: / / (YYYY/MM/DD)**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name SURNAME)**

**Signature (handwritten)**

**Immediate Manager:
☐ I agree to the above terms. (← Check ☑ to consent)**

**Date of Consent: / / (YYYY/MM/DD)**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name SURNAME)**

**Signature (handwritten)**