start:
Coaching

Admission sheet

1. Personal Data

Surname:	First Name:
Birthday:	Place of birth:
Gender:	Nationality:
Adress:	
Phone, private:	Phone, business:
Mobile:	Fax:

_____ _____

Place, Date Signature

start:
Coaching

Declaration of Consent / Declaration of Confidentiality

Dear client,

We hereby inform you about the processing of your personal data in our institution start: GmbH and the rights to which you are entitled under data protection law.

As part of the profile analysis, we ask for your personal contact details and information about your life situation. We process this personal data in order to be able to carry out qualified diagnostic work. For this purpose it is necessary that your coach is released from the duty of confidentiality towards the employees of institution start: GmbH. All employees are subject to confidentiality.

With your signature, you agree to the documentation, data processing and storage of your personal data and the release from confidentiality towards other employees. The release from confidentiality includes all facts and statements that I Ms/Mr _____ have entrusted.
You will not suffer any disadvantages as a result. You can revoke your consent at any time with effect for the future. We will delete your personal data as soon as they are no longer required for the aforementioned purposes. In addition, we will save your personal data insofar as we are legally obliged to do so. Corresponding obligations to provide evidence and storage arise e.g. from the tax code. The retention periods are therefore up to ten years.

Client data:
Mr / Ms _____

born on the _____ resident in _____

_____ _____
Date Signature

start:
Coaching

Consent to video-based coaching

First Name and surname: _____

Adress: _____

Date of Birth: _____

I declare that I have been sufficiently informed about the course of the coaching session via video, its technical requirements and data protection security aspects and its billing. Furthermore, I agree to the processing of the data by Facharzt-Sofort GmbH and its processors in accordance with our data protection regulations.

I also certify that

- I have the technical requirements for conducting online coaching.
- I do the online coaching to ensure data security and trouble-free processes closed rooms and quiet surroundings.
- I ensure that third parties (e.g. Family members, work colleagues) cannot gain knowledge of the content discussed (e.g. by listening in the adjoining room).
- I refrain from video and/or audio recordings of the online coaching.
- I prevent other disruptions to the online coaching (e.g. switching off other communication media such as mobile phones, phone or email; no disturbances by pets or the courier).

I am aware that I can revoke this declaration of consent at any time and that a verbal notification is sufficient for this.

_____ _____

Signature of coach Signature of coachee

start:
Psychotherapie
& Coaching

Confirmation that the first on-site interview was prevented

First Name and surname: _____

Adress: _____

Date of birth: _____

I hereby confirm that I will not be able to attend the initial consultation on site for personal reasons. For this reason, I would like continuous telemedical treatment.

Place and date: _____ Signature of coachee:_____

start:
Coaching

Consultancy contract

In between _____
(hereinafter referred to as coach)

and

Mrs/Mr _____

born on: _____

Residence: _____
(hereinafter referred to as coachee).

The following agreements are made (type of advice etc.)

_____

_____

_____

_____

_____

_____

To communicate with institution start: GmbH, please use the following contact details:

❑ Landline _____

❑ Mobile _____

It is also possible to communicate digitally with institution start: GmbH. These communication channels are mainly used for arranging appointments and other organizational coordination. Sensitive personal data is not sent digitally.

I was informed about the fundamental uncertainty of the various digital communication channels.

I agree to the use of the following communication channels:

❑ SMS _____

❑ WhatsApp _____

❑ Threema. _____

❑ other. _____

❑ E-mail, with the following e-mail address

_____

I can withdraw this consent in writing at any time.

_____

Place and date

_____ _____

Signature of coachee Signature of coach