



JUSTICE FOR PROTECTIVE MOTHERS



INFORMED CONSENT AND AUTHORIZATION FOR THE PROCESSING OF PERSONAL DATA AND DOCUMENTATION



VERSION 1.0



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LANGUAGE ENGLISH



*Protecting protective mothers
and defending children's human rights.*

JUSTICE FOR PROTECTIVE MOTHERS

A NON-PROFIT ASSOCIATION ESTABLISHED IN SWITZERLAND

INFORMED CONSENT AND AUTHORIZATION FOR THE PROCESSING OF PERSONAL DATA AND DOCUMENTATION

1. Identification of the Association

Justice for Protective Mothers is a non-profit association established in Switzerland and founded by protective mothers.

Its purpose is to support protective mothers in organizing their documentation, preparing case files, and defending human rights, while promoting the best interests of the child and respect for fundamental rights.

The association operates in accordance with its Articles of Association and the applicable Swiss legislation.

2. Information of the Person Submitting the Case File

Full Name:

Date of Birth:

Nationality:

Cuerent Country of Residence:

Email Address:

Telephone Number:

Initials used to identify the case file:

3. Declaration of the Person Submitting the Case File

I declare that:

☐ The documentation submitted relates to my personal case or to a situation for which I am legally authorized to provide information.

☐ The information provided is true and accurate to the best of my knowledge and belief.

☐ I understand that Justice for Protective Mothers does not provide legal advice or legal representation unless a specific agreement is concluded at a later stage.

☐ I understand that submitting my case file does not guarantee its acceptance, review, inclusion in a collective communication, intervention, or legal representation.

☐ I am responsible for the information and documentation that I submit.

4. Consent for the Processing of Personal Data and Documentation

I expressly authorize **Justice for Protective Mothers** to:

☐ Receive the documentation submitted.

- ☐ Organize and classify my case file.
- ☐ Review and analyze the documentation provided.
- ☐ Contact me whenever necessary.
- ☐ Prepare timelines, summaries, and indexes relating to my case file.
- ☐ Translate the documentation whenever necessary for the preparation of reports or communications addressed to national or international bodies.
- ☐ Retain my case file for as long as necessary to achieve the authorized purposes.

These authorizations are necessary for Justice for Protective Mothers to manage and review my case file.

5. Participation in the Collective Communication

- ☐ I authorize **Justice for Protective Mothers** to include my case file, in whole or in part and in accordance with the authorizations granted in this document, in the collective communication that the association intends to submit to the United Nations or to other international human rights protection mechanisms.
- ☐ I do not authorize the inclusion of my case file in such collective communication.

6. Authorization to Share Information

Whenever necessary for the authorized purposes, I authorize **Justice for Protective Mothers** to share my documentation with:

- ☐ Collaborating lawyers.
- ☐ Attorneys or other legal professionals.
- ☐ Psychologists, social workers, or other specialized professionals.
- ☐ National human rights organizations.
- ☐ International human rights organizations.
- ☐ United Nations bodies and mechanisms.
- ☐ United Nations Human Rights Council Special Procedures.
- ☐ Other international human rights protection mechanisms.
- ☐ National or international courts, where appropriate.
- ☐ Other competent institutions involved in the protection of human rights.
- ☐ I do not authorize my documentation to be shared with third parties without my prior express consent.

Whenever possible, the documentation will be anonymized in advance or limited to the information strictly necessary for the intended purpose.

7. Confidentiality

I wish my identity to be handled as follows:

- ☐ I authorize the use of my full name whenever it is strictly necessary.
- ☐ I prefer that only my initials be used.

☐ I request that my identity remain strictly confidential.

Unless expressly authorized otherwise, **Justice for Protective Mothers** will not publish the full name of the person submitting the case file or that of their children.

In the collective communication and in documents addressed to national or international bodies, the association will, as a general rule, use only the initials of the person submitting the case file and, where necessary to understand the context of the case, only the country of origin or the country of residence, while always respecting the level of confidentiality chosen by the person concerned.

8. Use of the Case

I authorize **Justice for Protective Mothers** to use information from my case file as follows:

☐ Yes, including my identity, whenever strictly necessary and expressly authorized.

☐ Yes, but only in anonymized form.

☐ Yes, using only my initials and my country of origin or country of residence.

☐ I do not authorize the use of my case file in reports or external communications.

☐ I authorize its use solely for the association's internal analysis.

The receipt of a case file does not automatically imply its inclusion in the collective communication or in any subsequent action.

9. Use of Documentation

I authorize the use of the following documentation, always respecting the level of confidentiality selected above.

Document	Yes	No
Photographs	☐	☐
Anonymized court decisions	☐	☐
Anonymized medical reports	☐	☐
Anonymized psychological reports	☐	☐
Anonymized expert reports	☐	☐
Anonymized case timeline	☐	☐
Anonymized witness statements	☐	☐
Other anonymized documents	☐	☐

10. Data Protection

Justice for Protective Mothers undertakes to process all information received confidentially and solely for the purposes authorized by the person submitting the case file.

The association will implement reasonable measures to protect the documentation against unauthorized access, loss, alteration, or improper disclosure.

Access to the documentation will be restricted exclusively to those persons who require it for the authorized purposes.

The information will never be used for commercial purposes.

Justice for Protective Mothers undertakes at all times to respect the decisions made by the person submitting the case file regarding the processing, use, and level of confidentiality of their documentation. No information will be used beyond the scope of the authorizations granted in this document.

Should the association consider it necessary to use the documentation for a purpose other than that expressly authorized in this document, it will first obtain the express consent of the person submitting the case file.

11. Retention of Documentation

The documentation will be retained only for as long as necessary to achieve the purposes authorized by the person submitting the case file or while proceedings relating to the case file remain ongoing.

Once these purposes have been fulfilled, the association may delete, return, or anonymize the documentation in accordance with the applicable legislation.

12. Withdrawal of Consent

The person submitting the case file may withdraw all or part of their consent at any time by providing written notice to **Justice for Protective Mothers**.

The withdrawal of consent shall not affect any processing already carried out or any actions already undertaken with the person's prior authorization.

Where the documentation has already been lawfully transmitted to an authorized body or institution, its withdrawal may be subject to the rules applicable to that recipient.

13. Independence of the Association

Justice for Protective Mothers shall retain full independence in assessing the case files it receives.

The receipt of a case file does not necessarily imply its acceptance, inclusion in the collective communication, legal representation, or any specific action by the association.

The association may request additional documentation or decide not to include a case file where the available information is insufficient, cannot be adequately verified, or does not correspond to the purpose of the initiative.

14. Final Declaration

I declare that I have read this document in its entirety.

I declare that I have understood its contents and have had the opportunity to request any clarification I considered necessary.

I give my consent freely, voluntarily, and on an informed basis.

I confirm that the options selected accurately reflect my wishes regarding the processing, use, and disclosure of my information and documentation.

Place:

Date:

Full Name:

Signature:

Internal Use Only – Justice for Protective Mothers

Case File Number:

Date Received:

Person Responsible:

Observations:

This document forms an integral part of the case file submitted to **Justice for Protective Mothers** and shall be kept together with the rest of the documentation provided.

The signature of this document confirms that the person submitting the case file has read, understood, and accepted the conditions and authorizations selected herein.