

## **FAIR CONSENT TO DISCLOSE CLIENT INFORMATION**

**SUMMARY:** This consent gives permission to Sunrise Banks to share back to Prepare + Prosper your personal information and account activity so FAIR can track trends across FAIR accounts.

You have elected to participate in the Financial Access in Reach Program (“FAIR Program”) offered in partnership by Prepare + Prosper (“P+P”) and Sunrise Banks. As part of the FAIR Program, you are applying to obtain certain financial products and services offered by Sunrise Banks through the FAIR Program, such as a deposit account and/or a loan (“Products”).

By submitting an application for a Product(s) via the FAIR Program, you consent to Sunrise Banks sharing personal information about you with P+P, such as your name, contact information, social security number, and any other personal and financial information you provide as part of the application process (“Application Information”).

By obtaining any of the Products, you also consent to Sunrise Banks sharing with P+P additional information related to your Products with Sunrise Banks on an ongoing basis, such as account activity, payment history and balance information, and the same information regarding any other products or services offered by Sunrise Banks that you may utilize (“Product Information”). P+P will use this information for administration and evaluation of the FAIR Program, and to contact you regarding other P+P programs.

You acknowledge that by choosing to enroll in the FAIR Program you will become subject to the privacy and information security policies of Sunrise Banks’.

Should you wish to withdraw this consent at any time, you may contact Prepare + Prosper at (651) 262-2173.

*By signing below, I authorize Sunrise Banks to release to P+P my personal information, application information, monthly checking, savings and/or credit builder account activity, payment history, and balance information, and information concerning any other products or services offered by Sunrise Banks that I may utilize.*

*By signing below, I have read the consent information above and agree to participate.*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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



## **FAIR CONSENT TO PARTICIPATE IN THE FAIR EVALUATION**

**SUMMARY:** By signing this consent, you agree to participate in learning and evaluation activities to provide our evaluation team at the University of Minnesota feedback to help us improve the FAIR products and experience.

We want to learn from your experience with FAIR. We've engaged a team of researchers from the University of Minnesota's Future Services Institute to help us gather feedback.

- The contact and survey information that you provide today as part of the sign up process will be used as part of the evaluation.
- The administrative and account data from Sunrise Banks about your FAIR account activity will also be shared and used.
- There will also be opportunities to give feedback in-person or by text, phone call, and/or online surveys in the next 12 months. Any time you participate in formal feedback, you will receive an incentive (ranging \$10 - \$30) to thank you for your time and participation.

We will use all contact information and data for evaluation purposes only, and will not disclose any of your personal information to anyone outside of the program team - researchers and FAIR staff.

We want to stress your participation in feedback is voluntary and the information shared will be kept confidential.

### **CONTACTS, QUESTIONS, WITHDRAWAL OF CONSENT:**

For questions, concerns, or complaints about the evaluation, or if you feel you have been harmed by participation you may contact Dr. Jodi Sandfort, 612-625-3536. Also feel free to send an email to the evaluation team at [results@umn.edu](mailto:results@umn.edu) at any time if you have any questions. If you wish to withdraw this consent at any time, you may contact FAIR staff at (651) 262-2173.

*I authorize Sunrise Banks to release monthly FAIR account activity and balance information to the program team for program evaluation purposes.*

*I have read the consent information above and agree to participate in feedback opportunities*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

