

PART 2

Sim Impact Measurement



In order to operate the WaveLength charity, understand the impact of our work on individuals, develop and improve WaveLength charitable operations and to inform future decision making, we would like to collect data in relation to your health, as per question 5 below and any further information about your health you provide to us in this form. We need your explicit consent to process such information about you. You have the right to withdraw your consent at any time, except to the extent that action has already been taken based on your consent, and that the withdrawal will not apply to information that has already been processed based on your consent. Providing health data to us is entirely optional. If you do not consent, please do not make an application, complete question 5 or provide any health data to us in this form.

We will store and process personal data you have provided as set out in the WaveLength Privacy Notice available at: https://wavelength.org.uk/contact/privacy-cookies-wavelength-website/ Please only tick the box that is closest to how you feel.			
1. How often do you feel that you lack companionship?			
2. How often do you feel left out?			
3. How often do you feel isolated from others?			
. How often do you feel lonely?		,	
	Some of the time	Often / al	ways
. In general, would you say that your health is			
Poor Fair Good V	ery good	Excellent	
lame			
iigned	Date		
			_
Please help us to continue to help those in need. Your feedback is extrem eam will gladly organise everything and come to you.	nely important an	d necessary t	o us. Our
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