

## **DATA PROTECTION NOTICE**

### **regarding the medical examination of successful candidates to Eurojust selection procedures**

As Eurojust collects and further processes personal data, it is subject to *Regulation (EU) 2018/1725 of 23 October 2018 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data, and repealing Regulation (EC) No 45/2001 and Decision No 1247/2002/EC* ('the Regulation').

The following information is provided as per Articles 15 of the Regulation.

#### **1. Context of the processing activity and Controller**

As Eurojust collects and further processes personal data in the context of the medical examination of successful candidates to Eurojust selection procedures, it is subject to the Regulation.

Collection and processing of personal data in the context of the medical examination of successful candidates to Eurojust selection procedures are under the responsibility of the Controller, who is the Head of the HR Unit and can be contacted at [hohrdconfidential@eurojust.europa.eu](mailto:hohrdconfidential@eurojust.europa.eu).

#### **2. What personal information do we collect, for what purpose, under which legal bases and through which technical means?**

##### ***Purpose of the processing***

The purpose of the processing is to determine whether a successful candidate in a Eurojust selection procedure is physically fit to perform his/her duties.

##### ***Data subjects***

Data subjects are successful candidates to Eurojust selection procedures (temporary and contracts agent staff)

##### ***Types of personal data***

The following **categories of personal data** are processed in the context of the above mentioned processing activity:

- A medical examination questionnaire (Annex I) containing general medical questions to enable the examining physician to assess the (prospective) staff member's fitness for employment in combination with the medical tests the (prospective) staff member will undertake. In addition, the candidate's name, sex, marital status, address, contact details, date of birth, place of birth, nationality, position applied for, status, place of employment, information on whether the candidate had undergone a medical examination for a European institution in the past, information on whether the candidate was employed by a European institution in the past, when and in which position.
- A fit for employment certificate prepared by the Eurojust medical service, containing the name of the staff member and the declaration that s/he is fit for employment.
- Communication with the Eurojust Medical Service and the candidate related to the booking of the medical examination.



### **Legal basis**

The legal bases for the processing activities are:

- Article 5(1)(b) of the Regulation: processing is necessary for compliance with a legal obligation to which the controller is subject; and,
- Articles 28 and 33 of the Staff Regulations of Officials and Articles 13 and 83 of the Conditions of Employment of Other Servants of the European Union.<sup>1</sup>

### **Technical means**

Technical measures include storing the medical data in D'arbois, an electronic secure system accessible only by the Eurojust doctor and the nurses performing the medical examinations. At the end of the retention period, data deletion is automatic.

The fit for employment certificate is stored in the staff member's personal file.

### **3. Who has access to your personal data and to whom is it disclosed?**

The recipients of the medical data related to the medical examination is the Eurojust medical service ([keuringen@zorgvandezaak.nl](mailto:keuringen@zorgvandezaak.nl)) and the relevant staff member undergoing the medical examination.

The recipients of the fit for employment certificate is the Human Resources Unit of Eurojust and the relevant staff member undergoing the medical examination.

### **4. How do we protect and safeguard your information?**

All email communication with staff regarding medical appointments is kept in a separate outlook folder only accessible by HR staff members.

Fit for employment certificates are kept in the staff member's personal files that are either kept in SYSPER or in locked cabinets in an access control office.

All medical information is kept in the electronic secure system of the Eurojust medical service, accessible only by the examining physician and nurse. At the end of the retention period, data deletion is automatic.

### **5. How can you verify, modify or delete your information?**

You have the right to access your personal data and to relevant information concerning how we use your personal data. You have the right to request rectification of your personal data. You have the right to ask that we delete your personal data or restrict its use. Where applicable, you have the right to object to our processing of your personal data, on grounds relating to your particular situation. Where applicable, you have the right to your data portability. We will consider your request, take a decision, and communicate it to you. For more information, please see Articles 14 to 21, 23 and 24 of Regulation (EU) 2018/1725. Please note that in some cases restrictions under Article 25 of Regulation (EU) 2018/1725 may apply (see College Decision 2020-04 of 15 July 2020 on internal rules concerning restrictions of certain data subjects' rights in relation to the processing of personal data in the framework of activities carried out by Eurojust, available in the Eurojust website [here](#)).

To exercise your rights, please contact the Head of the HR Unit at [hohrdconfidential@eurojust.europa.eu](mailto:hohrdconfidential@eurojust.europa.eu).

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<sup>1</sup> Regulation No 31 (EEC), 11 (EAEC), laying down the Staff Regulations of Officials and the Conditions of Employment of Other Servants of the European Economic Community and the European Atomic Energy Community.



## 6. How long do we keep your personal data?

Fit for employment certificates are kept in the personal file of the relevant staff member for as long as the staff member is in active service and are destroyed after the staff member's departure.

In case a candidate that has undergone a pre-employment examination is not recruited by Eurojust, the Human Resources Unit will delete all data related to the pre-employment examination.

The Eurojust medical service in principle keeps medical data for 15 years from the date of formation as per article 7:454 of the WGBO (Wet Geneeskundige Behandelingsovereenkomst). The retention period is linked to a possible claim for invalidity from a staff member after leaving service. Longer retention periods could apply in case there are indications for ionization, biological agents or carcinogenic substances at the place of employment. Data deletion is automatic. However, Eurojust employees could request their data to be deleted upon exit from Eurojust before the period of 15 years lapses. Employees are informed of this option as a standard practice during their exit process.

Communication with the Eurojust Medical Service and the candidate related to the booking of the medical examination is kept as proof of service delivery and as a basis for paying the relevant invoice to the Eurojust Medical Service. This communication is kept in a secure mailbox where only member of the relevant HR colleagues have access. Data on financial transactions is kept in ABAC for 7 years after 31 December of the year of the financial transaction, in line with the Eurojust Record on Financial Transactions.

## 7. Contact information

In case of queries regarding the processing of personal data you may also contact the Data Protection Officer of the Eurojust ([dpo@eurojust.europa.eu](mailto:dpo@eurojust.europa.eu)).

## 8. Recourse

You have the right to lodge a complaint to the European Data Protection Supervisor via the email [edps@edps.europa.eu](mailto:edps@edps.europa.eu) or [https://edps.europa.eu/data-protection/our-role-supervisor/complaints\\_en](https://edps.europa.eu/data-protection/our-role-supervisor/complaints_en) if you consider that your rights under Regulation (EU) 2018/1725 have been infringed as a result of the processing of your personal data.



# Annex I Pre Employment Medical Examination

I THE UNDERSIGNED, ..... , UNDERTAKE TO SUPPLY ANY DOCUMENTARY MEDICAL EVIDENCE RELEVANT TO MY STATE OF HEALTH DEEMED NECESSARY FOR THE PURPOSE OF JUDGING MY FITNESS FOR EMPLOYMENT IN EUROJUST.

I DECLARE THAT MY ANSWERS TO THE FOLLOWING QUESTIONS ARE, TO THE BEST OF MY KNOWLEDGE, TRUE, COMPLETE AND ACCURATE. I AM AWARE THAT ANY INACCURACY OR OMISSION FOR WHICH I AM RESPONSIBLE MAY RENDER THE FINDING OF MEDICAL FITNESS NULL AND VOID.

Date: ..... Signature: .....

*(in block capitals)*

Surname ..... Forenames.....

Sex ..... Marital status.....

Address (street, town, county, country).....

Tel. (office)..... (home) ..... E-mail (home).....

E-mail (office) .....

Date of birth.....Place of birth ..... Nationality.....

Position applied for (nature of work, competition No, category).....

Status: official, member of temporary staff, member of contract staff, other .....

Place of employment .....

(\*) The medical examination before appointment is intended to

- determine physical fitness for employment (\*\*) in any of the European institutions in accordance with

<sup>o</sup> Articles 28(e) and 33 of the Staff Regulations

<sup>o</sup> Articles 12(2)(d) and 13, and 82(3)(d) and 83 of the Conditions of employment of other servants (CEOS)

- determine the entitlement to guaranteed benefits in respect of invalidity or death, as provided for in

<sup>o</sup> Annex VIII, Article 1, of the Staff Regulations

<sup>o</sup> Articles 28, second paragraph, 32, 95, and 100 of the CEOS

- protect the health of staff (not least under European directives)

(\*\*) An institution's medical officer may base a finding of fitness or unfitness not just on any physical or mental disorders from which a person might be suffering at the time of the examination, but also on a medically justified prognosis of potential disorders capable of jeopardising the normal performance of the duties in question in the foreseeable future (Court of First Instance, Cases T-121/89 and 6T- 13/90).

(\*\*\*) An official's or other servant's personal medical record is stored in the medical service of the European Union institution, body or agency at which he or she is employed.

The information you provide in this form will be only processed for the purpose of assessing that you are physically fit to take up employment at Eurojust in accordance with the Staff Regulations. The data will be only accessible by the Eurojust Doctor. The data controller is the Head of the Human Resources Unit. Your data will be archived in your medical file, which is exclusively managed by our medical service and will be automatically deleted after 15 years from the date of data formation. This retention period may be longer in case there are indications for ionization, biological agents or carcinogenic substances at the place of employment. Upon exiting Eurojust you can request the deletion of the data before the 15 years lapses. If you wish to exercise your rights as a data subject to access, correct, block or delete your personal data, as defined in [Regulation \(EU\) 2018/1725 of 23 October 2018](#) and the [data protection rules of Eurojust](#), please contact the [Human Resources Unit](#). You also have the right to put forward requests for information, inquiries or claims for an alleged breach of the data protection rules of Eurojust to [the Data Protection Officer](#). If you wish to receive more information on how we process your personal information or how to exercise your rights as a data subject, please consult our [Data Protection Notice](#).



# Annex I Pre Employment Medical Examination

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**FAMILY MEDICAL HISTORY**

Has any member of your family (father, mother, brother(s), sister(s)) suffered from

- cardiovascular disease (high blood pressure, coronary problems, etc.).....
- .....
- respiratory disorders (asthma, tuberculosis, etc.).....
- .....
- diabetes.....
- .....
- cancer .....
- .....
- mental illness (manic depression, schizophrenia, Alzheimer's disease, depression, other) .....
- .....
- neurological disorders (epilepsy etc.).....
- .....

**PERSONAL MEDICAL HISTORY**

ANSWER 'YES' OR 'NO' TO EACH QUESTION; IF THE ANSWER IS 'YES', GIVE THE DATE. LEAVING A BLANK OR DRAWING A LINE OR CROSS IS NOT A SUFFICIENT ANSWER. IF THE QUESTIONNAIRE IS NOT COMPLETED IN FULL, FURTHER ENQUIRIES WILL BE NEEDED, INVOLVING A DELAY.

1. Have you suffered from any of the following diseases or disorders? If so, please specify the year and give details:

	YES Date	NO		YES Date	NO
Frequent angina	.....	.....	Urinary tract disease Genital	.....	.....
Hay fever Asthma	.....	.....	organ disease Lumbago	.....	.....
Tuberculosis	.....	.....	Joint pain	.....	.....
Pneumonia	.....	.....	Skin disease	.....	.....
Pleurisy	.....	.....	Insomnia	.....	.....
Frequent bronchitis	.....	.....	Depression	.....	.....
Acute rheumatoid arthritis	.....	.....	Nervous or mental disorders	.....	.....
High blood pressure	.....	.....	Frequent headaches Fainting	.....	.....
Cardiovascular disease Pain	.....	.....	Epilepsy	.....	.....
in the heart region Varicose	.....	.....	Diabetes	.....	.....
veins	.....	.....	Sexually transmitted diseases	.....	.....
Digestive disorders	.....	.....	Tropical diseases Amoebiasis	.....	.....
Stomach ulcer	.....	.....	Malaria	.....	.....
Duodenal ulcer	.....	.....	Eye disorders Ear	.....	.....
Jaundice, hepatitis	.....	.....	disorders	.....	.....
Gallstones	.....	.....	Tumours, cancer	.....	.....
Hernia	.....	.....		.....	.....
Haemorrhoids	.....	.....		.....	.....

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2. Give details of any medical condition for which you are currently being treated.

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3. Have you ever been treated in hospital or at a clinic..... Where, when and for what reason? .....

.....  
 .....  
 Have you ever undergone surgery?..... Specify nature of operation(s) and date(s) .....

- .....  
 .....  
 4. Have you ever been absent from work for more than a month because of illness?.....  
 If so, when?..... What was the illness? .....
5. Do you have a partial permanent incapacity for work following an accident or illness?.....  
 If so, since when?..... Nature of the disability .....
6. Have you ever consulted a neurologist, psychiatrist, psychoanalyst or psychotherapist?.....  
 If so, give his/her name and address: .....

What was the reason for the consultation?..... Date.....

7. Have you ever undergone treatment for alcohol addiction?.....  
 for drug addiction?.....
8. Do you regularly take any medication (including oral contraceptives)?.....  
 Please give details .....
9. Have you gained or lost weight over the last three years? ..... If so, how much? .....
10. Have you ever undergone radiological or nuclear medicine examinations? .....If so, which examinations?

- .....  
 11. Have you ever undergone courses of radiotherapy or chemotherapy?.....  
 If so, specify the treatments .....
12. Have you ever been turned down for a job for health reasons? .....  
 If so, what were the reasons? .....
13. Have you ever spent time in a tropical country?.....If so, how long?.....
14. Do you consider yourself  
 - to be in good health? .....
15. Do you smoke regularly? .....

If so, do you smoke  cigarettes  a pipe  cigars?

What is your consumption of the above?.....

For how many years have you been smoking? .....

16. Are you often tired for long periods and/or for no apparent reason? .....
17. What is your daily/weekly alcohol consumption? .....
- Do you take or have you ever taken narcotic or other non-medical drugs? .....
18. Has your doctor or dentist told you that you will need medical or surgical treatment in the near future? .....
19. Any other important information about your health: .....
20. Do you play any sport? .....Specify .....
21. What is your current occupation? .....
22. Have you suffered medical problems when working on screen? .....
23. Have you ever had an industrial accident or suffered from an occupational disease? .....
- Have you suffered any after-effects? .....



# Annex I Pre Employment Medical Examination

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Do you suffer from any resulting partial permanent invalidity? .....

24. List any occupational or other hazards to which you have been exposed .....

25. For women: the urine test has to allow for menstruation. Where applicable, please give the date of your last period

.....

Date ..... Signature .....



# Annex I Pre Employment Medical Examination

DOCTOR'S COMMENTS ON MEDICAL HISTORY: .....

.....

## MEDICAL EXAMINATION

**General appearance:** Weight ..... Height .....

Skin ..... Subcutaneous fat.....

**Mental state:**

.....

**Head and neck:**

Tongue..... Teeth..... Ears - Nose – Throat .....

Thyroid gland ..... Tonsils.....

**Heart and circulation:**

Action ..... Blood pressure.....

Murmurs ..... Pulse.....

**Lungs**

Percussion..... Auscultation .....

**Abdomen:**

Abdominal wall .....

Liver ..... Spleen ..... Hernial

Intestines ..... openings .....

**Skeletal structure and muscles:** .....

**Urogenital tract:** ..... **Common**

**integument and ganglions:** ..... **Central nervous**

**system:**

Form of pupils ..... Pupillary reflex ..... Cranial nerves ..... Babinski .....

Patellar reflex ..... Achilles tendon reflex ..... Abdominal reflexes ..... Romberg ..... Sensibility:

.....

**Blood test:** .....

**Urine test:** .....

**ChestX-ray:** .....

**ECG:** .....

**Ophthalmological examination:** .....

**Other examinations:** .....

**Summary of examination:** .....

**Conclusion:** .....

Place ..... Date .....

Signature of examining doctor