

Consent Withdrawal Form – Adult

Please complete and deliver this form to the relevant school/academy office with your signature.

Please note that the school / academy may have contractual, statutory and/or regulatory reasons why we will still process and hold details of a pupil, parent, staff member, volunteer or other person.

Where two parents share parental responsibility, or where parental responsibility is shared and the pupil is capable of expressing a view, and there is conflict between the individuals, the process of withdrawing consent will be subject to an evaluation and discussion to enable a decision to be reached that is considered to be in the pupil's best interests.

Withdrawal of consent for an individual

I, , withdraw consent for
..... (School) to process my personal data.

I withdraw consent to process my personal data for the purpose of
..... which
was previously granted.

Signed:

Date:

Received by school

Staff member:

Dated:

Action taken: