

Consent Withdrawal Form (for an individual)

Please complete and deliver this form to the Headmasters PA with your signature.

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

Where two parents share parental responsibility, or where parental responsibility is shared and the student 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 student's best interests.

We may need to seek identification evidence and have sight of any Court Order or Parental Responsibility Agreement in some cases to action this request. If this is the case a senior member of school staff will discuss this with you.

Withdrawal of consent for an individual

l,			, withdraw consent for Thomas Telford School to process my									
personal	data.	ı	withdraw	consent	to	process	my	personal	data	for	the	purpose
of								, wh	ich was	s prev	iously	granted.
Signed:								Date:				
			 To	be comp								
Received	(date):_											
Name of s	staff:											
Actions:												