



Thomas Telford School

QUALITY THROUGH COOPERATION

Consent Withdrawal Form (on behalf of a Student)

Please complete and deliver this form to the school office 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 on behalf of a student

I, _____, withdraw consent in respect of _____
(Student Name) for Thomas Telford School to process my personal data. I withdraw consent to process their personal data for the purpose of _____, which was previously granted.

I confirm that I am the parent/carer of _____ and that I have parental responsibility for the student.

Signed: _____ Date: _____

To be completed by the School office:

Received (date): _____

Name of staff: _____

Actions: _____