

Consent Withdrawal Form – on behalf of Pupil

Please complete and return this form to the school reception 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 pupil, parent, staff member, volunteer, or another 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.

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 designated member of school staff will discuss this with you.

Withdrawal of consent on behalf of a pupil

I (parent name) withdraw consent in respect of
 (pupil name) for St Michael's Church of England High
 School to process their personal data. I withdraw consent to process their personal data for the purpose of
, which was granted previously.

Signed: _____ Date: _____
 (Parent/Carer)

Received by school
 School staff member: _____ Date: _____

Actions: _____

OUR SCHOOL PRAYER:

What does the Lord ask of you?

To act justly, to love mercy and to walk humbly with your God.

Micah 6vs.8