

Consent Withdrawal Form – Adult

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 pupil, parent, staff member, volunteer or other person.

Where two parents share parental responsibility, or where PR 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 Anthony Gell School to process my personal data. I withdraw consent to process my personal data for the purpose of ………………………………………………………………………………………, which was previously granted.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office use:**

Received by school, dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Staff Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Actions: