



School Lane, Swinford, Lutterworth
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Mr Edy O'Connor and Mrs Rachel Chamberlain
Co-Headteachers

Consent Withdrawal Form – on behalf of Pupil

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.

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 pupil

I, , withdraw consent in respect
of(Pupil Name) for Swinford CE Primary 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 (Parent/Carer) and that I have
parental responsibility for the pupil.

Signed:

Date:

Received by school

Name of staff member:

Date:

Actions: