



Withdrawal of consent form – adult

Please complete and deliver this form to the school office with your signature.

Please note that as a school/Trust 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.

I, withdraw consent for
.....[insert school name]
to process my personal data. I withdraw consent to process my personal data
for the purpose of which
was previously granted.

Signed:

Dated:

Received by school

Name **school/Trust** staff member:

Dated:

Actions: