



Withdrawal of consent form – adult

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

Please note that as an academy 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 (name of school) 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 of school staff member:

Dated:

Actions:

