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.
Withdrawal of consent for an individual
I,
Signed:
Date:
Received by school
School staff member:
Dated:
Actions: