



St. Joseph's Catholic Primary School



Withdrawal of Consent Form – Adult

Please complete and sign this form and deliver to the school office.

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.

I withdraw consent for the School to process the personal data described below relating to the named pupil.

Name of person withdrawing consent	
A description of the personal data that this withdrawal concerns and for which consent was previously granted	
Signed:	
Date:	

For school use only:	
Date received by school	
Name of staff member receiving withdrawal form	
Record of actions taken	