

# Parental Consent Form/ Processing Pupil / Student Data GDPR



## Pupil / Student Details

Pupil	Details
<b>Name</b>	
<b>Year</b>	
<b>Class</b>	

## Parental / Legal Guardian Details

Parent / Carer	Details
<b>Name</b>	
<b>Relationship to pupil / student</b>	
<b>Address</b>	
<b>Home Telephone</b>	
<b>Mobile Phone</b>	
<b>Email</b>	

## Parental/Carer Consent

### Publications, Marketing & Information

Publications and marketing consent	Consent
	Yes = ✓
	No = X
I am happy to receive newsletters, attachments and information via email.	
I am happy to receive newsletters, attachments and information from Friends via email	

## Photos and Video

We really value using photos of pupils, to be able to showcase what we do in school and show what life at our school is like to others, so we would appreciate you taking the time to give consent again.

At Overstone, we sometimes take photographs of pupils We use these photos in the prospectus, on the school website and on display boards around school.

We would like your consent to take photos of your child and use them in the ways described above. If you're not happy for us to do this, that's no problem, we will accommodate your preferences.

Please tick the relevant box(es) over the page:

Photo and video consent	Consent Yes = ✓ No = X
I am happy for the school to take photographs of my child.	
I am happy for photos of my child to be used on the school website.	
I am happy for photos of my child to be used in the school newsletter.	
I am happy for photos of my child to be used in the school prospectus.	
I am happy for photos of my child to be used on internal displays.	
I am happy for photos of my child to be used on the digital signage Machine.	
I am happy for photos of my child to be used on the Welcome Screen.	
I am happy for photos of my child to be used in the media, for example local newspapers.	
I am happy for photos of my child to be used on social media, for example Facebook or Twitter.	
I am happy for the school to take videos of my child.	
I am happy for photos of my child to be used in the shared classroom / subject learning journals (Years N, R & 1)	
I am happy for my child's image to be included in the School's annual formal class photograph.	
I am happy for my child's image to be included in the School's annual formal individual / sibling photographs.	
I am happy for my child's image to be included in any formal whole school photograph.	

## Food Allergies

Please could you inform us if your child is allergic to any particular item or should not eat specific foods. This includes severe and minor allergic reactions. Please note it is the responsibility of the parents to keep the school informed of any allergies that your children may have, now or in the future.

My child is **NOT** allergic to any foods

My child **IS** allergic to the following foods (**Please list**):

- 1)
- 2)
- 3)
- 4)
- 5)
- 6)
- 7)
- 8)
- 9)
- 10)

Signed \_\_\_\_\_ Parent/Guardian

Date \_\_\_\_\_

## Internet Access

I give permission for my child to access the internet via the school's secure website as part of his/her education including ICT / Computing lessons.

Signed \_\_\_\_\_ Parent/Guardian

Date \_\_\_\_\_

## Off-site activities

I give my permission for my child to take part in:

Off-site activities consent	Consent
	Yes = ✓
	No = X
Supervised visits/sports events to local destinations (within 3 miles) away from the main school site	
Supervised one-day non-residential visits within the UK	
(These would still be subject to standard school letter/permission slips)	

## Medical consent

I give my permission for:

Medical consent	Consent
My child to be given first aid by a trained member of staff during any on-site or off-site activity	Yes = ✓ No = X
My child to receive urgent dental, medical or surgical treatment, including anaesthetics, as may be considered necessary by the medical authorities present, during any on-site or off-site activity	
My child's information to be shared with the NHS and other relevant health professionals	
Plasters to be applied to my child	
(Please add any additional medicines to administer)	

## Emergency Treatment

In the event of a significant accident or emergency situation, the school will make every effort to contact parents or guardians immediately by telephone using the contact details that you have provided. (Please note: it is your responsibility to ensure that the school always has up-to-date contact and medical information.)

## Declaration

In the event of an accident, I agree to my son / daughter receiving any emergency treatment as considered necessary by the medical authorities present.

I will inform the School Office as soon as possible of any medical changes or other circumstances that may arise throughout my child's time at Overstone.

Signed \_\_\_\_\_ Parent/Guardian

Date \_\_\_\_\_

If you change your mind at any time, you can let us know by emailing [email address], calling the school on telephone number.

Please also see our Privacy Notice for Pupils and Parents on the school website for further clarification.

If you have any other questions, please get in touch using the details in the contact section of the school website.