



CONSENT FOR DATA SHARING WITH THIRD PARTIES

Name of Pupil _____

Name of Parent/Carer _____

Dear Parent/Carer

In order to comply with the General Data Protection Regulations, we share some of your personal information with third parties. Full details of all third parties we share data with, including details of where information is held, can be found in our Privacy Notice which can be found on our website: <http://www.communityacademiestrust.org/en-GB/trust-information>. Whilst the majority of the information you provide to us is mandatory, some of it is provided to us on a voluntary basis and we require your consent in order to be able to process this information.

In this form we have set out:

- (a) Details of the third parties that we currently use, and
- (b) The personal information that we share with them

We should be grateful if you would indicate whether you consent to your information being shared for the following purposes by circling the appropriate response. Please return the form to the Office.

ParentPay

Purpose of sharing: to allow parents/carers access to the payment system to purchase food and refreshments from the school canteen, pay for trips and other payable items available through the school.

Personal Information Shared:

- ☐ Pupil name
- ☐ Pupil Unique Pupil Number
- ☐ Year group
- ☐ Registration group
- ☐ Date of birth
- ☐ Parent name
- ☐ Address
- ☐ Gender
- ☐ Email address

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO

Cool Milk (only applicable to pupils aged under 5 years)

Purpose of sharing: for pupils aged under 5 who are eligible for free milk at school under the Cool Milk scheme.

Personal Information Shared:

- ☐ Pupil name
- ☐ Date of birth
- ☐ Class

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO

IXL – Maths learning website

Purpose of sharing: Education.

Personal Information Shared:

- ☐ Pupil name

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO



School Nurse

Purpose of sharing: for vaccination and health monitoring purposes.

Personal Information Shared:

- ☐ Pupil name
- ☐ Date of birth
- ☐ Address
- ☐ Parent name
- ☐ Parent telephone number
- ☐ Medical/dietary concerns
- ☐ GP details
- ☐ First language
- ☐ Details of any Child in Need/child protection issues

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO

Spag.com

Purpose of sharing: Education.

Personal Information Shared:

- ☐ Pupil name
- ☐ Year group

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO

E-schools

Purpose of sharing: to allow the school to communicate with parents via email

Personal Information Shared:

- ☐ Pupil name
- ☐ Parent name
- ☐ Parent mobile number/email address
- ☐ Year group

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO

Teachers2Parents Text Message

Purpose of sharing: to allow the school to communicate with parents via text message

Personal Information Shared:

- ☐ Pupil name
- ☐ Parent mobile number
- ☐ Year group

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO

Accelerated Reader

Purpose of sharing: Education.

Personal Information Shared:

- ☐ Pupil name
- ☐ Class
- ☐ Date of birth

I confirm my consent to the sharing of mine and/or my child's data with the third party named above.

Consent: YES / NO



Consent for Data Sharing

Please note that you have the right to withdraw your consent for the sharing of personal information at any time. You can notify us of your consent withdrawal in writing by contacting: datacontroller@communityacademiestrust.org

Signature _____ Print Name _____

Date _____