

## **CONSENT FORM FOR THE USE OF BIOMETRIC INFORMATION**

Please complete this form if you consent to the school taking and using information from your son's fingerprint by Rokeby School as part of an automated biometric registration system. This biometric information will be used by Rokeby School for the purposes of accessing lunch in the dining hall and access to the library.

In signing this form, you are authorising the school to use your son's biometric information for this purpose until he either leaves the school or ceases to use the system. If you wish to withdraw your consent at any time, this must be done in writing and sent to the school at the following address:

Rokeby School  
190 Barking Road  
E16 4DD

Once your son ceases to use the biometric system, his biometric information will be securely deleted by the school.

Having read guidance provided to me by Rokeby School, I give consent to information from the fingerprint of my son being taken and used by Rokeby School for use as part of an automated biometric recognition system for accessing school lunch and access to the library

I understand I can withdraw my consent at any time in writing.