



STANTONBURY
SCHOOL

Stantonbury School

Executive Principal: Jim Parker
Stantonbury, Milton Keynes, MK14 6BN

enquiries@stantonbury-tove.org.uk
Main reception: 01908 324 400
www.stantonbury-tove.org.uk

Photos and videos

- We sometimes take photographs of pupils. We use these photos to help us to give people an idea of what life at our school is like, for example in the newsletter and on the school website.
- Please tick the relevant box(es) below, sign and return this form to school.

USE OF PHOTOS	TICK ✓
I am happy for the school to take photos 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 printed school materials, for example the school prospectus.	
I am happy for photos of my child to be used in internal displays.	
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 Twitter.	
I am happy for the school to take videos of my child.	
I am happy for the school to use videos of my child for promotional purposes, such as on the school website.	
I am NOT happy for the school to take or use photos or videos of my child.	





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Biometric data

- We use what is known as 'biometric data' in school. Specifically, we use your child's fingerprints
- We'd like your consent to use your child's fingerprints in the ways listed below. This information is held securely in school, and helps us operate these systems more efficiently
- At any time, you can object to our use of this data or withdraw your consent, and we'll stop using your child's fingerprints in the ways described below – for this type of data you'll need to do this in writing so please email enquiries@stantonbury-tove.org.uk or send a letter to the school office

USE OF BIOMETRIC DATA	TICK ✓
I am happy for the school to use my child's fingerprints for them to receive school meals.	
I am happy for the school to use my child's fingerprints for them to access their photocopying account.	
I am happy for the school to use my child's fingerprints for them to use school library services.	
I am NOT happy for the school to use my child's biometric data in these ways.	

Student Name:

Signature:

Date:

