**Consent for a Parent/Guardian to access your personal information**

A parent who does not live with you has asked us to tell them which school you attend.

Before we tell them we would like you to tell us whether you agree to this or not.



[ ]  I agree to my information being shared



[ ]  I do not want my information shared

I agree I have made my own decision about sharing my information.

Name:

Signature:

Date:

**We may contact you directly to discuss your consent if we have any concerns.**

Please return this form to: transparencyteam@essex.gov.uk

Or post to: Transparency Team. PO Box 11, County Hall. Chelmsford. Essex CM1 1QH