

# Biometric Data Consent Form

This **biometric data consent form** is designed to ensure the lawful collection and use of students' biometric information at [School Name]. Please read the following carefully before providing consent.

## 1. Purpose of Biometric Data Collection

The school intends to collect and use biometric data (such as fingerprints or facial recognition) for the following purposes:

- Student identification for school meals and attendance
- Library book borrowing
- Security and access control within school premises

## 2. Data Handling Procedures

- All biometric data will be stored securely and used exclusively for the stated purposes.
- Your/your child's biometric data will not be shared with third parties without explicit consent, except as required by law.
- Data will be retained only for as long as necessary and deleted securely when no longer needed or when the student leaves the school.

## 3. Rights of Parents and Students

- You may withdraw your consent at any time by contacting the school office in writing.
- You have the right to request access, correction, or deletion of your/your child's biometric data.
- Consent is voluntary. If you do not give consent, alternative identification methods will be provided.

## 4. Contact Information

For any questions or requests regarding biometric data, please contact:

[Data Protection Officer Name]

[School Address]

[Phone Number / Email Address]

## 5. Consent Declaration

I, Parent/Guardian Name:

give consent for the collection and use of biometric data from my child, Student Name:

, attending year/class , at [School Name].

Signature:  Date:

*Note: Schools should adapt this template to meet their specific policy and legal requirements. Ensure compliance with local data protection legislation.*