

REQUEST TO WITHDRAW CONSENT

I. APPLICATION TO WITHDRAW CONSENT RELATING TO PERSONAL DATA

1. Under the Personal Data Protection Act 2012 ("PDPA"), you can choose to withdraw consent given to us previously to use or disclose your personal data. Upon receipt of your written request, we require reasonable time to process the request and notify you of the consequences, depending on their complexity, of providing services to you.
2. Please complete this form and click "SUBMIT" below or email the completed form to us:
DataProtection@tts.edu.sg

II. PARTICULARS OF REQUESTOR

Name of requestor:

Contact number:

Email address:

Relationship to Tanglin Trust School:

Please check the applicable box(es):

☐

I am making a request relating to my own personal data

☐

I am making a request on behalf of my child

Please complete this section if you are making the request on behalf of your child

Name of your child whom you are making the request on behalf of:

Contact number:

Email address:

Relationship to the other individual(s)

For current student(s) provide Year Group(s)

III. DESCRIPTION OF THE PERSONAL DATA

To enable us to process your request quickly and efficiently, please indicate the type of personal data and the specific purpose for which consent is to be withdrawn.

Types of Personal Data

☐

Name

☐

Contact details (Telephone, address, email address)

☐

Identity numbers

☐

Financial account numbers

☐

Health information

☐

Photograph / Video

☐

Others (please specify):

Purposes Consent is Withdrawn For

- ☐ Direct marketing
☐ Fundraising
☐ School's publications
☐ Alumni Activities
☐ Third party partner Information
☐ Others (please specify):

Please note the school is required to retain certain personal data of staff, students, and parents by law, and for records in the event of a child safeguarding concern or an historical claim against the school.

Please note that your request to withdraw consent does not affect our obligation to retain your personal data where required for applicable regulatory requirements and/or business requirements.

IV. DECLARATION

By submitting this form, I confirm that the information stated above is true, complete, and accurate to the best of my knowledge and belief.

Name & Signature

Date (DD/MM/YYYY)

Additional Notes:

We will provide receipt acknowledgement to the contact email addresses we have on the student record in iSAMS to ensure authenticity.

If required we will request proof of identity and relationship to individuals whose data you are requesting, e.g. copy of NRIC or passport.

We will endeavour to provide the information within 10 business days of receipt of the request, however, certain circumstances may lead to more time being required, for example sensitivity of information, and the availability of responsible staff who have restricted access to the requested information. If we require more time, we will advise you accordingly of the reason for delay and new expected fulfilment date.

Please note that we may continue to collect, use, or disclose your personal data, as the case may be, under other applicable bases of processing for which consent is not required (e.g. under any written law or exceptions to consent under the PDPA).

Upon ceasing (and causing our data intermediaries and agents to cease, where applicable) the collection, use, or disclosure of your personal data, we may still retain your personal data for any applicable legal or business purposes.