







Withdrawal form from data processing for parents

The National Tutoring Programme – Tuition Partners

Dear Parent / Guardian,

We are writing to let you know that your child's school is participating in the 'The National Tutoring Programme - Tuition Partners' (the TP programme). The TP Programme provides subsidised tuition for pupils needing additional support during the 2020/21 academic year as a result of the school closures due to the Covid-19 pandemic. The programme is being funded by the Department for Education and managed by the Education Endowment Foundation (EEF). We (Fresh Start in Education Ltd) are the Tuition Partner responsible for the delivery of the tutoring sessions in your child's school.

A consortium led by National Foundation for Educational Research (NFER) is evaluating the TP Programme to find out if it has an impact on children's attainment and to identify ways to improve tuition delivery in the future. To that end, your child's school will share data about your child with us (the TP), and with the Evaluators. The attached privacy notice summarises what personal data will be collected, and how this data will collected, used, shared and protected. We, as well as the Evaluator, have robust procedures in place to make sure that we comply with the requirements of GDPR.

If you are happy for your child's data to be used for this evaluation, **you do not need to return the reply slip**. However, if you would prefer your child's data not to be shared, stored and used for this project, please complete the form below and return it to your child's teacher within one week of receiving this letter. If you would like to withdraw your child's data from the evaluation at any subsequent stages please inform your child's teacher.

If you have any queries please contact us via email at NTP@freshstartedu.co.uk

Yours sincerely,

Fresh Start in Education Ltd

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You only need to complete this form if you **DO NOT** wish your child's data to be shared, stored and used for this evaluation.

I DO **NOT** give permission for data about my child that is collected as part of the TP delivery or evaluation, to be stored or used for research purposes.

Your child's name	Child's class	
Name of school		
Your full name		
Your signature	Date	