



# St. John Fisher Catholic Voluntary Academy

Part of the Blessed Peter Snow Catholic Academy Trust  
Headteacher: Kevin Higgins, B.A. (Hons.)  
Oxford Road, Dewsbury, West Yorkshire, WF13 4LL  
Telephone: (01924) 527000 Fax: (01924) 527004  
Web site: <http://www.sjohnfisher.org.uk> E-mail: [headteacher@sjohnfisher.org.uk](mailto:headteacher@sjohnfisher.org.uk)



Dear Parent / Guardian

## CONSENT FOR THE USE OF BIOMETRIC INFORMATION IN SCHOOL

As you are aware, we currently use your child's thumbprint as an important part of the canteen system to ensure that mealtimes operate effectively and that the system is secure.

**Following a recent change to the software and hardware used to accommodate new notes and coins**, it is necessary for parents to approve the continuation of the current system for your child on an individual basis. The alternative is that students will need to be issued with a pin number which they will need to share with the canteen staff when paying for food. This would not be as secure and also the process of topping up their credit will be more cumbersome and likely to lead to lengthier queues and possibly the suspension of daily cash payments.

Please find overleaf a consent form which should be signed then returned to the Main Office or Form Tutor by Friday 17 March. **Once we have your consent (or not) this form will not need to be sent out again**, any changes to consent can be sent in writing by you, we will then update our system accordingly.

Yours sincerely

Kevin Higgins  
Headteacher

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### Mission Statement:

*Following the example of our Patron, St. John Fisher, priest and scholar, we aim to love one another throughout our life at school, to learn and develop our full potential in the image of Christ.*

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[www.sjohnfisher.org.uk](http://www.sjohnfisher.org.uk)

# St John Fisher Catholic Voluntary Academy

## CONSENT FORM FOR THE USE OF BIOMETRIC INFORMATION IN SCHOOL

Please complete this form if you consent to the school taking and using information from your child's fingerprint by St John Fisher Catholic Voluntary Academy as part of an automated biometric recognition system. Currently, this biometric information will be used only for the purpose of administration of the canteen. Should we wish to extend the system e.g. to the library for example, we would write to let you know.

In signing this form, you are authorising the school to use your child's biometric information for this purpose until he/she either leaves the school or ceases to use the system. If you wish to withdraw your consent at any time, this must be done so in writing and sent to the school.

Once your child ceases to use the biometric recognition system, his/her biometric information will be securely deleted by the school.

**I consent / do not consent to information from the fingerprint of my child**

**Name of student:**

**Form:**

being taken and used by St John Fisher Catholic Voluntary Academy for administrative purposes. I understand that I can withdraw this consent at any time in writing.

**Name of Parent/Guardian:** .....

**Signature:** ..... **Date:** .....

**PLEASE RETURN TO MAIN OFFICE (RECEPTION)  
BY FRIDAY 17 MARCH 2017**

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