#### **School Release of Information**Consent to Communication and Disclosure of School Student Records

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give my consent for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
(Name of educational Institution, Therapist, etc)
to disclose and communicate regarding any and all of the information set forth below to Dr. Laurie Hoke, Educational Concierge

Information to be disclosed to recipient:

The complete student record of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,
(Student Name)

(Please check all that apply)

Report Card \_\_\_

MTSS Forms \_\_\_

Case Study Evaluation \_\_\_

Eligibility/IEP Paperwork \_\_\_

504 Paperwork \_\_\_

Discipline Records \_\_\_

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Permission for the aforementioned to speak to:**

(Please check all that apply)

School Counselor/Social worker \_\_\_

School Psychologist \_\_\_

Teachers \_\_\_

Private Therapist \_\_\_

Private Tutor \_\_\_

Other\_\_\_\_\_\_\_\_\_\_

This consent is valid for one calendar year from the date set forth below, and may be revoked at any time in writing. I also understand that I have the right to inspect and copy the information to be disclosed pursuant to this consent.

Parent/Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: If the student is under age 12, only the parent’s signature is needed. If the student is between ages 12 and 18, both the parent’s and student’s signature are needed. If the student is age 18 or over, only the student’s (or if the student has been judged to be incapacitated by a court, the guardian’s) signature is required.

**Please return your completed form by email to laurie@specialeducationguru.com**