

**PRIVATE EDUCATIONAL DATA
 CONSENT TO RELEASE/REQUEST**

Parent(s) this form allows information about your child to be exchanged. Please sign and return it to the school. (address below) "Treatment, payment, enrollment of eligibility of benefits may not be conditioned on obtaining the individual authorization"

Learner's Full Name: _____

ID: [][][][] [][][] [][][] [][][][] Birthdate: [][] [][] [][]
 Month/Day/Year: _____ Grade _____

Parent Name: _____ Parent Address: _____

I authorize _____ for Minneapolis Public Schools (District #1)

Person responsible/Position _____

Address _____

City _____ State _____ Zipcode _____

to release written and verbal information to: _____
 to obtain written and verbal information from: _____
(Check either or both boxes as needed)

Name, Title _____

Organization _____

Address _____

City _____ State _____ Zip code _____

School records may be examined by parent(s), or learner if of legal age (18 years old or older). The information to be released:

- Official School Records (name, address, birthdate, sex, attendance record, grade level, grades, class rank, standardized group test results, discipline records)
- School Health Record
- School Psychological Reports
- Special Education Records (including related services)
- Others (specify) _____
- Chemical Health Report
- Teacher, Counselor, other Staff Observations
- School Social Work Report

The purpose for the request: _____

1) I understand that this consent takes effect the day that I sign it. It expires on _____ (Month, Day, Year) or no more than one year from the date of my signature.

2) I may change this consent at any time by sending a written notice of the change to the releasing school.

3) School officials may disclose this information if authorized by law to do so.

Month/Day/Year: _____

 Parent Signature (or Learner, if of legal age)

- MPS will not re-release information to any outside agencies without legal authority
- A photocopy of this completed form is valid as original
- MPS is not authorized or funded to pay for this information