

## PARENT PERMISSION TO OBTAIN OR RELEASE INFORMATION

Note to Parents/Guardians: Because the Boys & Girls Club works in partnership with the Roseburg School District to provide academic support for Club members, the Club is requesting your permission to release information that will assist us in better serving your child.

I, the undersigned, hereby request and authorize Roseburg Public Schools to release the information which I have indicated below to Boys & Girls Club of the Umpqua Valley: Name of child \_\_\_\_\_\_ Date of birth \_\_\_\_\_ School (Roseburg District Only) Grade Please select the items you give permission to release: Official student academic/administrative records (identifying information, grade level completed, grades, class rank, attendance records, and group aptitude and reading/math assessment results, and other achievement test results) Behavior records, plans and current information Medical and/or related health records Educational team reports and other related reports Individualized education programs Other (specify) Or, ☐ I choose to opt-out from this opportunity Signature of Parent, Legal Guardian Date

This release form is valid for one year from date of signature, unless specified otherwise.

