

Dear Parent,

The assessment process for student's parentally placed in a chartered or non-chartered non-public schools requires the cooperation of two and possibly three different agencies. These agencies are:

- Chartered or Non-Chartered School where your child attends school
- Public school district where the chartered/non-chartered school is located (referred to as the Attending District)
- Public school district where you reside (referred to as the Residential District)

To effectively evaluate your child and to recommend an appropriate educational program, these agencies need to share information related to your child. Personally identifiable information such as current levels of progress, test results, grades, and summary reports related to your child that are used to determine eligibility for programs and services may be included in this request. In order for each agency to meet their responsibility to your child, data needs to be collected from the other agencies. Data about your child can not be shared without your written consent.

The purpose of this form is to explain and obtain your authorization for each agency to share data related to your child with the other agencies. The form identifies the agencies and summarizes the data to be shared. Data will not be released to any agency not listed, or any person not involved in the assessment and or education of your child.

Student Name: _____ **Date of Birth:** _____

Agency List:

Chartered/Non-Chartered Non-Public: _____

Attending School District: _____

Residential School District: _____

Purpose of this Authorization:

To aid in making present and future educational decisions.

Other: _____

Specific Authorizations:

_____ Authorization for the chartered/non-chartered nonpublic school to share educational records with the attending district for the purpose of determining if a disability is suspected and assessing eligibility. Data may include grades, standardized test scores, intervention data, and observational data. Authorization also allows staff from both agencies to participate in meetings to discuss this data and the education of your child.

_____ Authorization for the attending district to share assessment results with the chartered/non-chartered nonpublic school. Data may include observations, multi-factored evaluation results, recommendations for education your child. Authorization also allows staff from both agencies to participate in meetings to discuss this data and the education of your child.

_____ Authorization for attending district to share assessment results with the residential district. Data may include Evaluation Team Report, observation summaries, and allows staff from both agencies to participate in meetings regarding the education of your child. The residential district will utilize this data to develop a free and appropriate educational plan for your child.

_____ Authorization for the residential district to share data with the attending district. If you chose to decline placement in your residential district and to remain in the non-public school, this data will be used to assist in providing educational services to your child. If applicable, a service plan may be implemented. Authorization also allows staff from both agencies to participate in meetings to discuss this data and the education of your child.

By initialing the above, I am granting permission for the release of information and for the agencies to communicate in order to aid in making educational decisions and recommendations for my child.

Signed: _____ (Parent)

Signed: _____ (Parent)

If you have any questions regarding this form please contact:

Name: _____

District: _____

Phone: _____