



SAMPLE

**RELEASE OF STUDENT INFORMATION WITH PARENTAL CONSENT
AGREEMENT TO LIMIT USE OF INFORMATION RECEIVED
(Nonschool Agencies or Individuals)**

Name of student: _____

Description of information requested: _____

Purpose for which requested: _____

I certify that the information received will be used only for the purpose noted above, and will not be transmitted to others.

(Signature of individual authorized to receive information)

(Organization or agency)

(Date)