PESHTIGO SCHOOL DISTRICT

Peshtigo, Wisconsin 54157

AUTHORIZATION FOR EXCHANGE OF HEALTH & EDUCATION INFORMATION

NAME OF STUDENT_____ **DATE OF BIRTH**_____

PARENT/GUARDIAN_____ **TELEPHONE**_____

ADDRESS_____

I hereby authorize the Peshtigo School District to furnish information to the agency (ies) or person (s) listed below; and I hereby authorize the same agency (ies) or person (s) to release all information indicated below concerning the above named student to the Peshtigo School District. ****This permission is valid for one year from the date signed. A copy of the form is as effective as the original.****

NAME	**AGENCY AND ADDRESS**
_____	_____
_____	_____
_____	_____
_____	_____

- ☐ Official student academic/administrative records (identifying information, grade level completed, grades, class rank, attendance records, and group and achievement test results)
- ☐ Medical and/or related health records
- ☐ Psychological evaluations or social work reports
- ☐ Evaluation and related reports
- ☐ Appropriate agency reports
- ☐ Individualized education program
- ☐ Other (sepecify)_____

I understand that I may revoke this authorization at any time by submitting written notice of the withdrawal of my consent and that the written revocation must be given to the agency/organization I authorized to release information. I recognize that health records, once received by the school district may not be protected by the HIPPA Privacy Act and may become education records protected by the Family Education Rights and Privacy Act (FERPA) with additional protection afforded by Wisconsin Statutes 118.25 (2m)(a)(b) and 146.83. I also understand that if I refuses to sign, such refusal will not interfere with my child's ability to obtain health care.

Signature of parent/relationship Date

Administration Office
341 North Emery Avenue
(715) 582-3677
Fax (715) 582-3850

Peshtigo Elementary Learning Center
341 North Emery Avenue
(715) 582-3762
Fax (715) 582-4106

Peshtigo Middle/High School
380 Green Street
(715) 582-3711
Fax (715) 582-0740