

PERU CENTRAL SCHOOL DISTRICT

Intermediate School

P.O. Box 68

116 Pleasant Street

Peru, NY 12972-0068

(518) 643-6100 Fax: (518) 643-6126

Dr. Thomas Palmer
Superintendent of Schools
(518) 643-6000

Matthew Slattery
Principal
mslattery@perucscl.org

Consent for the Exchange of Confidential Information

I hereby authorize and request Peru Elementary, Peru Central School District, to release and/or exchange the following information pertaining to my child, _____
(DOB _____), to _____
for the purpose of evaluating and planning.

Information to be released should include:

- Educational Records
- Individual Educational Plan (IEP)
- Psychological and Psychiatric Evaluations
- Medical and/or Health information
- Social History
- Other:

I understand that by law I need not consent to the release of information. However, I choose to do so willingly and voluntarily for the purpose(s) specified above. I am not giving permission for re-disclosure to any person or facility, except another school system that the child may attend in the future. I also request that this consent become invalid after twelve (12) months from the date signed below. I understand that I may revoke consent at any time.

Parent Signature

Date

Witness Signature

Date