

RELATIONS WITH GOVERNMENTAL ENTITIES:
LOCAL GOVERNMENTAL AUTHORITIES

GRA (REGULATION)
(EXHIBIT)

The following pages contain exhibits related to local government authorities:

Exhibit A: Student Interviewer Identification and Notification Form – 1 page

Exhibit B: Acknowledgement of Removal of a Student by Legal Authorities – 1 page

Exhibit C: Consent to Release Student Record(s) to an Agency – 1 page

RELATIONS WITH GOVERNMENTAL ENTITIES:
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EXHIBIT A

Northwest Independent School District
Student Interviewer Identification and Notification Form

This section to be completed by Campus:

Agent's Name: _____ Badge/ID Number: _____

Name of Agency: _____

Supervisor's Name: _____ Phone Number: _____

Regional Office or Agency's Main Office Phone Number: _____

This section to be completed by Agency Representative:

Northwest ISD is in accordance with Family Code 52.01 and 262.104 which provides for cooperation with other governmental authorities. Northwest ISD does require representatives of government agencies to be properly identified before interviewing a student.

Please check the government agency you are a representative for.

Law Enforcement Agency (*please specify*) _____

Texas Department of Family and Protective Services

Other _____

The above government agency, is requesting to speak to NISD student,

(Please Print)

In the event that the above government representative requests to interview a NISD student the principal or designee **will** request to be present. If the Law Enforcement representative requests to interview the student alone, (*please see below*). The principal or designee **will** notify the parent or legal guardian of the NISD student prior to the interview and give the parent or guardian the opportunity to be present prior to the interview. If the above indicated Agency request that the parent or guardian not be contacted (*please see below*).

Please check any that apply.

The above listed agency request to interview the NISD student alone.

The above Agency requests that NISD not notify the parent or guardian prior to the interview.
(*It will be the responsibility of the interviewing government agency to contact the parent or guardian*)

Signature of Agent _____ Badge/ID Number _____ Date _____ Time _____

ATTACH PHOTO COPY OF GOVERNMENT ISSUED ID

Original: Principal
Copy: Superintendent's Office

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EXHIBIT B

Northwest Independent School District
Acknowledgement of Removal of a Student by Legal Authorities

Student's Name:	Last	First	Middle	Grade Level
Administrator Supervising:				Campus

Date of Arrest/Removal	Student Signed Out in Attendance Office At (Time)		
Agency Represented:			
<input type="checkbox"/> _____ Police Department <input type="checkbox"/> Denton County Sheriff's Department <input type="checkbox"/> Tarrant County Sheriff's Department <input type="checkbox"/> Wise County Sheriff's Department <input type="checkbox"/> Texas Department of Protective and Regulatory Services <input type="checkbox"/> Other: _____ _____ 			
Officer's/Caseworker's Name:	Last	First	Badge Number
Officer's/Caseworker's Supervisor's Name			Contacted At (Phone Number)
Student Transported To (Location)			
Reason:			
<input type="checkbox"/> Off-Campus Action <input type="checkbox"/> On-Campus Action			
Specifically: _____			

Officer's/Caseworker's Designation of Parent Notification:	
<input type="checkbox"/> Officer/Caseworker will notify parent prior to school dismissal time (_____ -- campus indicates dismissal time) <input type="checkbox"/> Campus shall notify parent immediately and provide contact information as indicated below <input type="checkbox"/> Campus shall notify parent after _____ (officer/caseworker indicates time) and provide contact information as indicated below	
If the parent contacts the school prior to receiving notification, the officer/caseworker directs the campus to inform the parent to call the following contact person for information:	
Contact Name:	Phone Number:

The release of the above named student supercedes the responsibility of Northwest ISD to the student and his/her parents or guardians that would otherwise prevail. By taking possession of this student, the officer/caseworker assumes the duty of reasonable care for the safety and welfare of the student.

Signature of Administrator Releasing Student	Date
Signature of Officer/Caseworker Assuming Responsibility of Student	Date

For Office Use Only

Follow-Up Action, if applicable			
Parent:	Last	First	Middle
Contacted At (Phone Number)			
Date of Contact		Time of Contact	
Central Office Notification			
Superintendent's Office Notified		Date/Time of Notification	Method of Notification
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Original: Principal
Copy: Superintendent's Office

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EXHIBIT C

Northwest Independent School District
Consent to Release Student Record(s) to an Agency
(Records will not be forwarded to or shared with other individuals or agencies except as allowed to by law or agreed to herein.)

Student's Name: _____ Student's ID: _____
Date of Birth: _____ Grade: _____ Campus: _____
Parent's Name: _____
Address: _____
Home Phone: _____ Work Phone: _____ Email: _____

Agency to receive records:
Name: _____ Position: _____
Street: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email: _____
Purpose of Disclosure: _____

THE FOLLOWING RECORDS ARE AUTHORIZED FOR RELEASE:
 Regular Education Records Speech/Language Evaluation
 Court Orders, Decrees, Placement Agreements Medical/Health Records
 Discipline Records Report of Vision/Hearing Screening
 Psychiatric Reports Other Information (specify) _____

YES NO I have been fully informed and understand the activity for which consent is sought. This information will be released upon receipt of my written consent.
 YES NO I understand that my consent is voluntary and may be revoked anytime.
 YES NO I approve ongoing verbal communication with the above designated agency/individual to facilitate acquisition of the above requested records.

(Signature) (Relationship to Student) (Date)
As witnessed by: _____

(Signature) (Date)
*If this form is not signed in the presence of an authorized school district official, a notarized signature is requested:
Sworn and subscribed to before me on this _____ day of _____, 20____.

Notary Public in and for _____ County, Texas

Original: Principal
Copy: Record Management Officer