



Clairton City School District

501 Waddell Avenue
Clairton, PA 15025
(412) 233-9200

**AUTHORIZATION FOR RELEASE OF PROTECTED EDUCATIONAL & HEALTH INFORMATION
TO THE CLAIRTON CITY SCHOOL DISTRICT**

I hereby authorize the release of information/records of:

Student: _____ Date of Birth: ____/____/____

From School District/Facility/Physician): _____

Address: _____

Phone: _____ FAX: _____

To: **CLAIRTON CITY SCHOOL DISTRICT** Position (at CCSD): _____

at ***Clairton City School District, 501 Waddell Avenue, Clairton, PA 15025***; (412)233-9200, Ext. _____
for the purpose of continuity of care and appropriate educational placement.

I agree that information can be released by the following means (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Verbal | <input type="checkbox"/> Written | <input type="checkbox"/> FAX #: (_____) _____ - _____ |
| <input type="checkbox"/> Medical History/Reports/Immunizations | <input type="checkbox"/> Grades/Education Records/Test Scores | |
| <input type="checkbox"/> Social and Developmental History | <input type="checkbox"/> Withdraw Grades/Records | |
| <input type="checkbox"/> Visual and Auditory Evaluation | <input type="checkbox"/> Neurological Evaluations | |
| <input type="checkbox"/> Psychological Evaluation | <input type="checkbox"/> I.E.P. Reports/Evaluations | |
| <input type="checkbox"/> Psychiatric or Counseling Reports | <input type="checkbox"/> Attendance Records | |
| <input type="checkbox"/> Speech, Occupational, and/or PT Evaluations | <input type="checkbox"/> Incident Reports | |
| <input type="checkbox"/> Career Readiness Portfolio/Evidence | <input type="checkbox"/> Evaluations | |

I understand I have the right to cancel this Authorization at any time by sending a written request to the entity/person authorized above to release the information. If applicable, specify other expiration date/event here: ____/____/____

Signature of Parent/Guardian _____/____/____
Date

Signature of Authorized Person (In lieu of Parent/Guardian) _____/____/____
Date

INFORMATION IS TO BE USED FOR PROFESSIONAL PURPOSES ONLY AND IS TO BE KEPT CONFIDENTIAL.