MINNEAPOLIS PUBLIC SCHOOLS
Urban Education. Global Citizens.

COMMUNITY PARTNER PORTAL
CONSENT TO RELEASE and OBTAIN PRIVATE STUDENT DATA

Student's Name: _____, _____
Last Name *First Name*

Birthdate (MM/DD/YY): _____ Grade: _____ ID #: _____

_____
Parent/Guardian Name

_____
Address *City* *State* *Zip code*

I authorize Special School District No. 1, Minneapolis Public Schools, to release written and verbal information to, obtain written and verbal information from, and allow secured on-line access to student data and obtain on-line reports of interventions and interactions from:

_____
Name of Organization or Person *Name of Specific Program at Organization*

The information to be released will be student name, address, telephone, photograph, date of birth, dates of attendance, grade, current school, student ID, and the information I initial below:

_____ *Initial* Attendance: Including daily and period attendance for the current school year, reasons for absences, summary information by course for the school year, summary attendance data for the student's entire time with MPS

_____ *Initial* Classes and Grades: Including skills report cards, courses taken and grades given, credits received and GPA

_____ *Initial* Demographic: Including gender, home language, ethnicity, resides with name and contact information

_____ *Initial* Removals & Suspension: Including infraction date, action type and days, for the current school year

_____ *Initial* Enrollment/Schedule: Current courses enrollment, teachers assigned, teacher contact information

_____ *Initial* Homework: Including homework assignments and scores, assignment status (missing, complete), in-class tests

_____ *Initial* Special Status: Including if a student has/is an IEP or 504 Plan and English as a Second Language Learner

_____ *Initial* Test Scores: Including scores for state mandated or district wide tests

_____ *Initial* All other educational data necessary for the agency to provide service to the named student.

I understand that this consent takes effect the day that I sign it.
It expires one year from the date of my signature.
I may change this consent at any time by sending a written notice to the releasing agency.

_____ _____
Parent Signature (or Student, if of legal age) *Month/Day/Year*

Signed release does not guarantee access to student data through the Community Partner Portal. Final access is at the discretion of Minneapolis Public Schools.

Form last updated: 8.1.2022