THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
STUDENT SUPPORT SERVICES
FDLRS/PRESCHOOL DIAGNOSTIC CENTER
1960 LANDINGS BOULEVARD, SARASOTA, FL 34231
PHONE 941-927-9000 X31271 FAX 941-927-4058

AUTHORIZATION TO REQUEST RECORDS/INFORMATION

Instructions: Parent/guardian completes this form authorizing The School Board of Sarasota County, Florida, to request records/information that would be relevant for the child/student's educational planning and return to FDLRS/Preschool Diagnostic Center.

Child/Student Name _____ DOB _____

I, _____ (Parent/Guardian) do hereby authorize the following agencies or individuals in possession of records as indicated in the checklist below to release records/information to Sarasota County Schools for my child/student:

_____ Johns Hopkins All Children's Hospital
_____ Children First/Head Start
_____ Early Steps
_____ The Florida Center for Early Childhood
_____ Safe Children Coalition
_____ CenterPlace Health
_____ Pediatrician _____
_____ ENT _____
_____ Specialist _____
_____ Sertoma Kids
_____ Therapeutic Potentials, Inc.
_____ Children's Therapy Solutions
_____ Children's Therapy Works
_____ Sensory Solutions
_____ Preschool/Childcare Center
_____ Other _____
_____ Other _____
_____ Other _____

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that affords parents and student who are 18 years of age or older certain rights with respect to the student's education records. These rights are:

1. The right to inspect and review the student's education records
2. The right to request the amendment of the student's education records that the parent or eligible student believes are inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA
3. The right to provide written consent before the school discloses personally identifiable information (PII) from the student's education records, except to the extent that FERPA authorizes disclosure without consent
4. The right to file a complaint with the U.S. Department of Education concerning alleged failures to comply with the requirements of FERPA

Records/Information received will **NOT** be disclosed without prior written consent of Parent/Guardian or Adult Student to any other party except school officials with a legitimate educational interest.

I understand my signature below authorizes the release of records and pertinent information from the agencies or individuals in possession of records indicated above to Sarasota County Schools for the purpose of making eligibility recommendations for Exceptional Student Education programs, in accordance with federal, state, and district regulations.

I have been informed and understand my rights regarding the transfer of these records.

_____ _____ _____
Parent/Guardian Name (Print) Parent/Guardian Signature Date

Distribution: Original – Student file Copies – Agency/Individual in possession of record, Parent/Guardian

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
EXCEPTIONAL STUDENT EDUCATION
1960 LANDINGS BOULEVARD, SARASOTA, FL 34231
PHONE (941) 927-9000

EMAIL COMMUNICATION OPTION

Student Name _____ DOB _____ Date _____

School Sarasota County Schools _____ Grade PK _____ Student No._____

Dear Parent/Guardian,

Sarasota County Schools is now offering parents the option of receiving certain Exceptional Student Education (ESE) documents by email.

You may choose to receive the following by email:

1. Prior written notice (prior written notice serves as a vehicle of communication between schools and families. It is very important that parents are always well-informed about whatever action the school intends to take (or intends not to take) about their child.) Through prior written notice, the school can ensure that parents are up to date on what the school is proposing or refusing to do, as early as possible so that parents can participate in the school's proposed actions or respond to its refusals.
2. Procedural safeguards notice (procedural safeguards notice informs parents completely about their rights as parents and the protections they and their child have under special education law and its regulations)
3. Notices related to a due process hearing request (a due process hearing is designed to provide an opportunity to resolve differences between the parent and the district in matters regarding special education)
4. Individual Education Plan (IEP) and progress notes

☐ I agree to the use of email to receive special education documents.

Email address _____

☐ I do not agree to the use of email to receive special education documents.

_____ _____ _____
Parent/Guardian Name Parent/Guardian Signature Date

Distribution: Original - Student File Copy - Parent/Guardian