



4501 West Fourth Avenue
Hutchinson, KS 67501
620-663-7141
877-663-7141 (Toll free)
620-663-7148 (Fax)

Authorization to Release Student Information

The academic educational and non-directory information student records are confidential and protected by the Family Educational Rights and Privacy Act ("FERPA"), 20 U.S.C. 1232(g) and the related regulations in 34 CFR Part 99. The District may not release certain, non-directory information to another person without your written authorization. Completing this form will authorize the District to release specific information about the student identified below to the person(s) you designate below:

Student Name: _____ Date of Birth _____

Student Address: _____ Telephone: _____

Parent/Guardian Name _____

I hereby authorize representatives of Unified School District No. 309 to release academic educational information, both directory and non-directory, regarding the student identified above to the persons designated below:

Name Address

Name Address

Name Address

I understand this Authorization will remain in effect until I submit a written request to cancel this Authorization. To cancel this Authorization, send written notice to the Clerk of the Board of Education, 4501 West Fourth Avenue, Hutchinson, KS 67501

Date Parent/Guardian Signature

If this Authorization is not delivered in person, the following must be completed by a notary public:

State of _____ County of _____ : SS

The foregoing Authorization was signed before me, a notary public, this _____ day of _____, _____ by _____

who is (check one) _____ personally known to me or _____ whose identity was established by their drivers license or other photo identification.

Printed Name

Notary Public

[Seal]
My Commission Expires: _____

Deliver in person, by mail or fax to : Unified School District No. 309
Attention: Clerk, Board of Education
4501 West Fourth Avenue
Hutchinson, KS 67501
Fax: 620-663-7148