

Enhancing Education Summer Enrichment Program

Student Name _____ Male _____ Female _____

Address _____

City _____ Zip Code _____

Daytime Phone # _____ Work # _____ Cell # _____

Present Grade Level _____ Date of Birth _____

Teacher _____ School _____

Parent/Guardian _____ Relationship _____

Email Address (Required) _____

Emergency Contact _____

Transportation & Attendance

Will you be able to provide transportation to/from the tutoring site, Raytown Christian Church, if s/he is accepted into the program? ____ Yes ____ No

Please provide dates of other activities your child will be involved in during the tutoring period: July 9-July 27, 2018. (Scouts, Church camps, vacations, etc.) Activity(s): Date(s):

Academic Support Information

Does your child receive special education support? ____yes ____no

Has your child been diagnosed with a disability? ____yes ____no

Has your child been tested for a learning disability? ____yes ____no

Consent to Request and View Information

I give my permission for the director and board of Enhancing Education to request and view my child's school records (STAR Reading and Math only). I understand that all information will be kept confidential and will only be used for tutoring purposes.

Reading Level (Percentile Rank) _____ Math Level _____

PLEASE COMPLETE THE RELEASE OF INFORMATION FORM WHICH FOLLOWS. This form is required by the Family Educational Rights and Privacy Act (FERPA). School districts cannot release personally identifiable student records unless a specific consent is obtained from the parent or eligible student. Enhancing Education will keep this information confidential and will only use if for tutoring purposes.

STUDENT RECORDS

(Parent/Guardian Student Record Request)

Pursuant to the Family Educational Rights and Privacy Act (FERPA), the district is not able to disclose personally identifiable information from student records unless a specific consent exemption applies or unless written consent is obtained from the parent or eligible student. Because this request is not covered by a specific consent exemption, the following form must be completed and submitted by the parent or eligible student before the district will disclose student records. An "eligible student" means a student who has reached 18 years of age or who is attending an institution of postsecondary education.

Records will be provided in the format and by the method requested. The district will charge reasonable fees for record duplication and may require these costs to be paid prior to providing the records, in accordance with law.

Name of Student Whose Records Are Requested: _____

Method of Disclosure: Review Copy

I consent to the disclosure of the following records: [List the specific records to be disclosed and include dates if the disclosure is to be limited to records covering a specific date or date range.]

STAR Reading - most recent 2017-18 school records

STAR Math - most recent 2017-18 school records

This consent is valid for the following period of time [specify]: March 26, 2018 - July 31, 2018

Signature of Parent or Eligible Student

Date

This consent is provided for in the Family Educational Rights and Privacy Act of 1974, 34 C.F.R. § 99.30.

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Raytown C-2 School District, Raytown, Missouri

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