FERPA AND STUDENT AUTHORIZATION RELEASE

I certify that	
	• • • • • • • • • • • • • • • • • • • •
Print) and he/she has full authority in dealing with serve as the student's emergency contact, and heducational records.	school-related matters, shall
,	Responsibility – Please
Print) for the purposes other than attendance at the I District schools or participation in Dickinson Public S activities. The student is not currently expelled from	chools extracurricular
(Parent Name PRINTED)	_
(Signature of Parent)	-
(Parent Address)	-
(City/State/Zip)	-
(Parent Phone Number)	Notary Stamp
(Notary Signature) (Date)	-

I ASSUME ANY AND ALL PARENTAL RESPONSIBILITIES AND/OR LIABILITIES NORMALLY INCURRED BY THE PARENT/GUARDIAN.

(Name of Person Assuming Responsibility PRINTED)		
(Relationship to Student)		
(Signature of Person Assuming Responsibility)		
(Address)		
(City/State/Zip)	Notary Stamp	
(Phone Number)		
(Notary Signature) (Date)		
STUDENT INFORMATION:		
(Student's Full Name)		
(Date of Birth) (Grade)		
(School Last Attended) (Address) (City/State/Zip:)		
(Reason for Request)		

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