

Oneonta City Schools
27605 State Highway 75
Oneonta, AL 35121
Phone (205) 625-4106
Fax (205) 274-2910

CONSENT TO RELEASE OF INFORMATION

1. I/We authorize:

- The Oneonta City Schools System to obtain relevant confidential information and records of my child, _____, maintained by: _____

- The Oneonta City Schools System to share relevant information and records with others as necessary to provide services to my family and/or me.
- The Oneonta City Schools System to disclose personal identifying information concerning my family members to others, as necessary, to protect or provide services to my family and/or me.

2. I may revoke or alter this consent at any time in writing.

Parent's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Age-Appropriate Child's Signature: _____ Date: _____

Witness Name: _____

Title: _____

Witness Signature: _____ Date: _____