



CONSENT TO SERVICES and RELEASE OF INFORMATION
Under the Family Education Rights and Privacy Act (FERPA) 2018-2021

I consent for my family to receive school success services through the United Way Improving School Attendance Collaborative. To enable education planning and coordinate services, I also consent for Everett Public Schools to release my child(ren)'s educational records to assist the United Way Improving School Attendance Collaborative to provide services to my family.

The education records and information to be released may include:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Attendance | <input checked="" type="checkbox"/> Family history |
| <input checked="" type="checkbox"/> McKinney-Vento Records | <input checked="" type="checkbox"/> IEP, 504, FBA and BIP documents |
| <input checked="" type="checkbox"/> Grades | <input checked="" type="checkbox"/> Test scores, including SBA |
| <input checked="" type="checkbox"/> Discipline and behavior | <input checked="" type="checkbox"/> Classroom observation |
| <input type="checkbox"/> Other: _____ | |

This release allows the Improving School Attendance Program Coordinator and the Child Family Advocate (CFA) to access education records online and/or directly from the School or District. I understand the Program Coordinator and the CFA will use these education records to monitor my child(ren)'s academic progress and to evaluate and improve the support the CFA offers. I further understand that the CFA coordinates assessment, planning and intervention efforts with schools and other social service agencies, but that the CFA will not disclose my child's educational records to anyone outside the collaborative without written permission. A list of agencies participating in the Improving School Attendance Collaborative is included on the reverse of this document.

This release may be revoked or withdrawn at any time in writing, but that will not affect any information already shared. This consent and release of education records to the **United Way Improving School Attendance Collaborative and the CFA** will be **valid through the 2021 school year**, or as long as the student is served by the United Way Collaborative, whichever is the lesser time length.

_____ Parent/Caregiver's Name- PRINT	_____ Monica Wilson, Ed.S., NCSP Program Coordinator's Name
_____ Parent/Caregiver's Signature/Date	_____ Program Coordinator's Signature
_____ Date	_____ Date
_____ Phone:	_____ Phone: 425-347-6556 ext. 222
_____ Email:	_____ Fax: 425-353-5546
	_____ Email: monicabestwilson@housinghope.org

Your Child Family Advocate will be assigned by the Program Coordinator, and they will be in contact with you shortly.

Child Family Advocate (CFA): _____
Phone: _____
Email: _____



Family members included for this consent: (use additional space if needed)

Name (Parents and Children)	Date of Birth	Age	Gender	School (if any)

United Way Improving School Attendance Collaborative Partners

Amerigroup Washington
Boys and Girls Clubs
ChildStrive
College of Hope
Domestic Violence Services
Edmonds Community College
Everett Gospel Mission
Everett Police Department
Everett Public Schools
Homage Senior Services
HopeWorks

Housing Hope
Interfaith Family Shelter
Parent Trust for Washington Children
Providence Institute for Healthier Community
Refugee and Immigrant Services NW
SnoCo Early Learning Coalition
Tomorrow's Hope Child Development Center
United Way of Snohomish County
Volunteers of America
Workforce Snohomish
YMCA
YWCA

REVOKE/DECLINE

I, _____, revoke/decline this authorization of
Participant Name

Collaborative Services and the Release of Confidential Information.

Date _____

Participant Signature _____